

dignity &
rights
ethical treat
respect ca
& equality

STATISTICAL MONITORING

DECEMBER 2018

Our mission and purpose

Our Mission

To be a leading and independent voice in promoting a society where people with mental illness, learning disabilities, dementia and related conditions are treated fairly, have their rights respected, and have appropriate support to live the life of their choice.

Our Purpose

We protect and promote the human rights of people with mental illness, learning disabilities, dementia and related conditions.

Our Priorities

To achieve our mission and purpose over the next three years we have identified four strategic priorities.

- To challenge and to promote change
- Focus on the most vulnerable
- Increase our impact (in the work that we do)
- Improve our efficiency and effectiveness

Our Activity

- Influencing and empowering
- Visiting individuals
- Monitoring the law
- Investigations and casework
- Information and advice

We have a statutory duty to monitor the use of the Mental Health (Care & Treatment) (Scotland) Act 2003. Until 2017 we did this by publishing an annual monitoring report with comments and analysis on trends in the use of the Act. We also published an annual report on the use of the Adults with Incapacity (Scotland) Act 2000. As part of a strategic review we took the decision to publish the monitoring reports on the use of the Acts every second year. This year we published the report on the use of the [Adults with Incapacity Act in Scotland](#), and next year we will publish our report on the use of the Mental Health Act with comment and analysis. Our intention is to review some more in-depth areas on the use of the Acts in the alternate years. For example over the last few years we have reported on the increase in the use of emergency detention orders. Rather than continuing to report an increase we intend to look at this in more depth to find out why this might be.

This report gives the data on the use of the 2003 Act during 2017/18. This data was shared with health boards and local authorities at the annual end-of-year meetings with the Commission.

Contents

New episodes of civil compulsory treatment	3
Explanation of terminology	3
Emergency detention certificates (EDCs).....	3
Short term detention certificates (STDCs).....	3
Compulsory treatment orders (CTOs)	3
New episodes of civil compulsory treatment initiated 2008/09 to 2017/18.....	4
New compulsory episodes initiated 2008/09 to 2017/18 (rate per 100,000 population by episode starting order).....	5
Progression of types of compulsory civil episodes 2009/09 to 2017/18.....	6
1. New Orders.....	7
Emergency detention certificates (EDCs)	8
EDC 2017/18 Rates	14
EDCs with mental health officer (MHO) consent	16
Percentage of EDCs with MHO consent for all NHS boards 2017/18.....	17
Short term detention certificates (STDCs)	18
STDCs 2017/18 Rates	25
Compulsory treatment orders (CTOs).....	27
CTO 2017/18 rates	31
CTOs 2017/18 funnel plot	32
Variations between local authorities	33
2. Nurse's power to detain	35

3. Total number of Mental Health Act orders in existence	36
All orders	36
Compulsory treatment orders	37
Advance statements	39
4. Place of safety orders	40
5. Social circumstance reports (SCRs)	41
SCRs completed following STDC 2017/2018	42

New episodes of civil compulsory treatment

In 2017/18 we were notified of 5,647 new episodes of compulsory treatment during the year. This was an increase of 4.1% on the previous year. This is the highest number of new compulsory episodes since the 2003 Act was implemented, and is now above the level of new compulsory episodes under the Mental Health (Scotland) Act 1984 in 2001/02 (4,849) having followed an upward trend since 2009/10. In the last ten years the rate has increased from 80.5 (2008/09) to 104.1 (2017/18) per 100,000 population.

Explanation of terminology

Emergency detention certificates (EDCs)

Emergency detention certificates (EDCs) are designed to be used only in crisis situations to detain a person who needs urgent care or treatment for mental ill health. They can be issued by any doctor and allow someone to be kept in hospital for up to 72 hours.

Short term detention certificates (STDCs)

The preferred route to compulsory treatment is through short term detention orders. They should only take place if recommended by a psychiatrist and a mental health officer. These certificates can detain an individual in hospital for up to 28 days.

Compulsory treatment orders (CTOs)

A mental health officer (MHO) can make an application for a CTO to the Mental Health Tribunal. The application must include two medical reports, an MHO report and a proposed care plan. The Tribunal decides whether a CTO is to be granted. The Tribunal is made up of three people - a lawyer, a psychiatrist, and another person with relevant skills and experience, e.g. a nurse, social worker, or someone with personal experience of serious mental illness.

The CTO can last up to six months. It can be extended for a further six months and then for periods of 12 months at a time.

New episodes of civil compulsory treatment initiated 2008/09 to 2017/18

New episode starts with this order ^y	08/09	09/10	10/11	11/12	12/13	13/14	14/15	15/16	16-17	17/18	17/18 % change
EDC	1859	1805	1805	1766	1878	1889	1969	2165	2411	2700	12.0%
STDC	2229	2231	2423	2421	2451	2530	2803	2754	2908	2859	-1.7%
Compulsory Treatment Order (CTO)* ^{xx} (includes interim CTOs)	99	78	101	95	102	113	90	93	103	88	-14.6%
Total episodes	4187	4114	4329	4282	4431	4532	4862	5012	5422	5647	4.1%

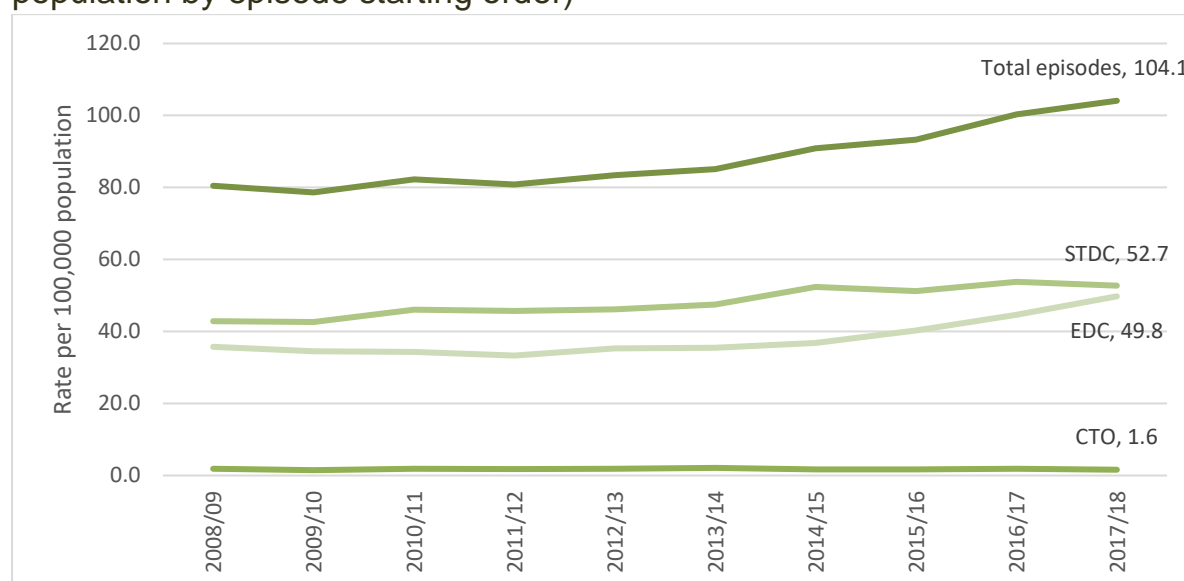
* In previous years data on CTOs has been taken from MHTS; this year all data for the ten years has been taken from the Commission information management system.

^{xx} Includes a small number of cases direct to interim CTO (ICTO) only, or initially to ICTO then onto CTO.

^y This is the starting order in a new sequence of one or more orders.

NB: these are new episodes only. This does not include EDCs and STDCs for people already subject to community CTOs. The numbers of EDCs and STDCs reported elsewhere in our report are larger because they do include these additional people.

New compulsory episodes initiated 2008/09 to 2017/18 (rate per 100,000 population by episode starting order)



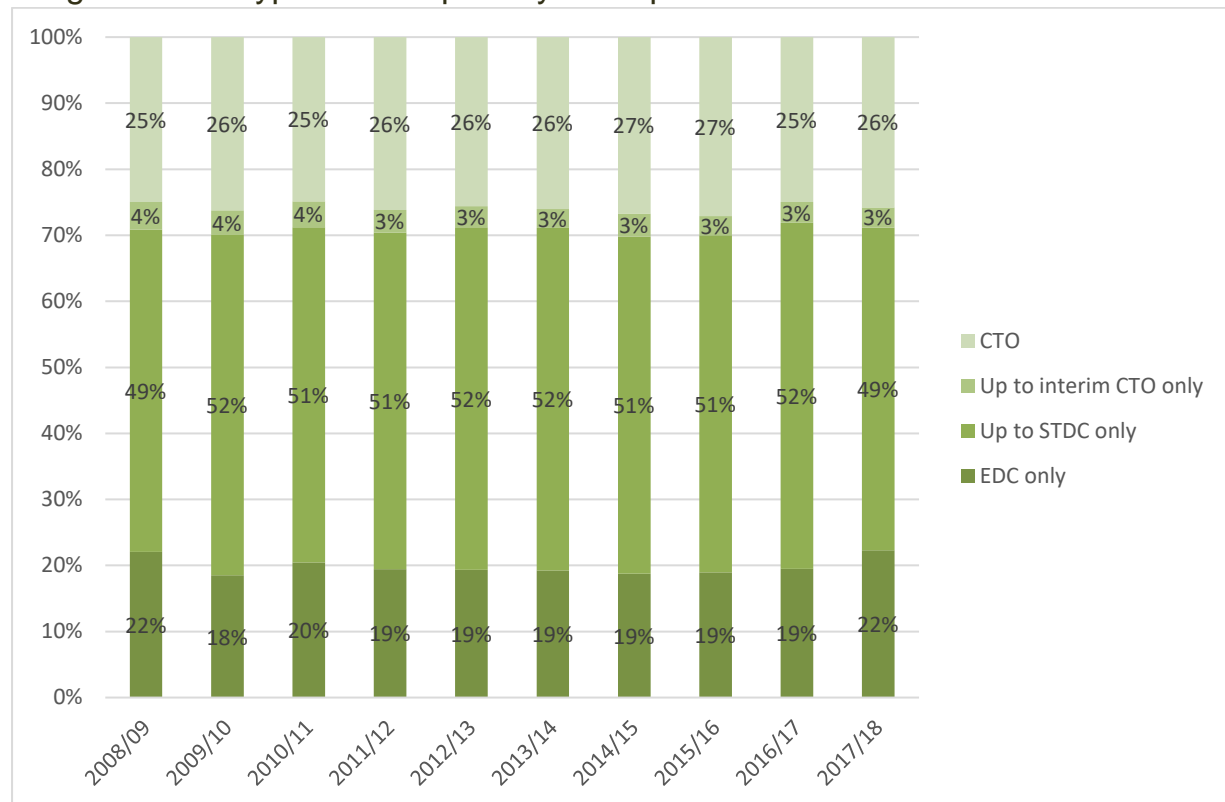
The number of new episodes starting with an EDC has risen by 12.0% this year with an increase of 45.2% since 2008/09. In the ten-year period the rate has increased from 35.7 to 49.8 per 100,000 population.

The number of people put straight onto an STDC has risen over the ten-year period by 29.3% (2008/09, 2,229 to 2017/18, 2,859) but the number decreased by 1.7% over the last year. In the ten-year period the rate has increased from 42.8 to 52.7 per 100,000. This is the preferred route to compulsory treatment as it affords the patient more safeguards.

New episodes per year starting at CTO were highest in 2013/14 (113, rate 2.1) and dropped to 88 in the last year (rate 1.6).

We looked at the progression of episodes of compulsory treatment that were initiated during the year.

Progression of types of compulsory civil episodes 2009/09 to 2017/18



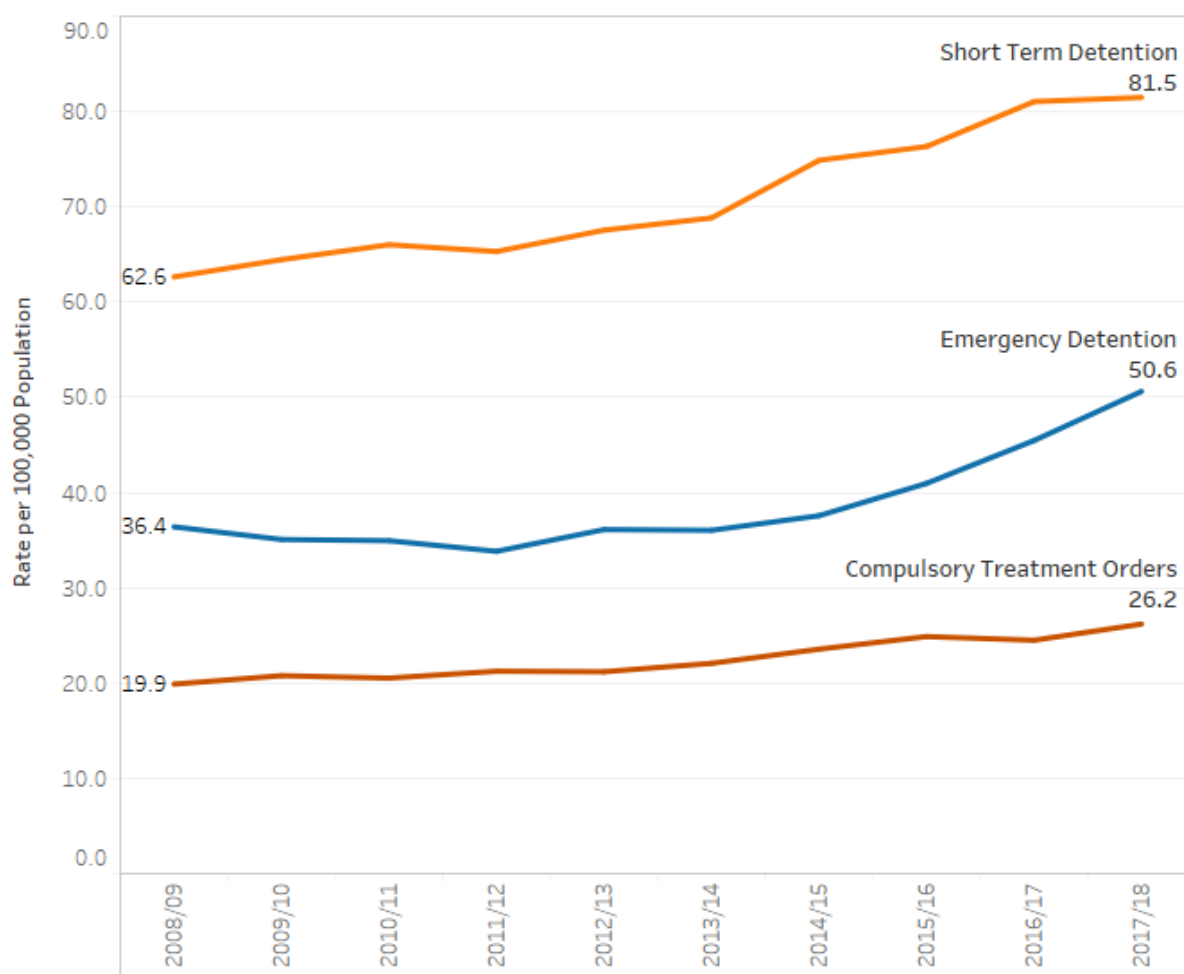
Findings of note from this chart are:

- Over the ten-year period around a quarter (24 to 27%) of all episodes of compulsory treatment resulted in the granting of a long-term CTO. In addition, 3 to 4% of episodes progressed to an ICTO without a final CTO being granted.
- The remaining 70 to 72% of all episodes of compulsory treatment lasted for 28 days or less. In 2017/18, 71% of all episodes lasted for 28 days or less.

1. New orders

Scotland New orders - 2008/09 - 2017/18

Rate per 100,000 population



Includes hospital and community CTOs (excludes interim orders)

The Scotland rates for the three main orders continue to rise.

On the following pages we look at the different orders in more detail.

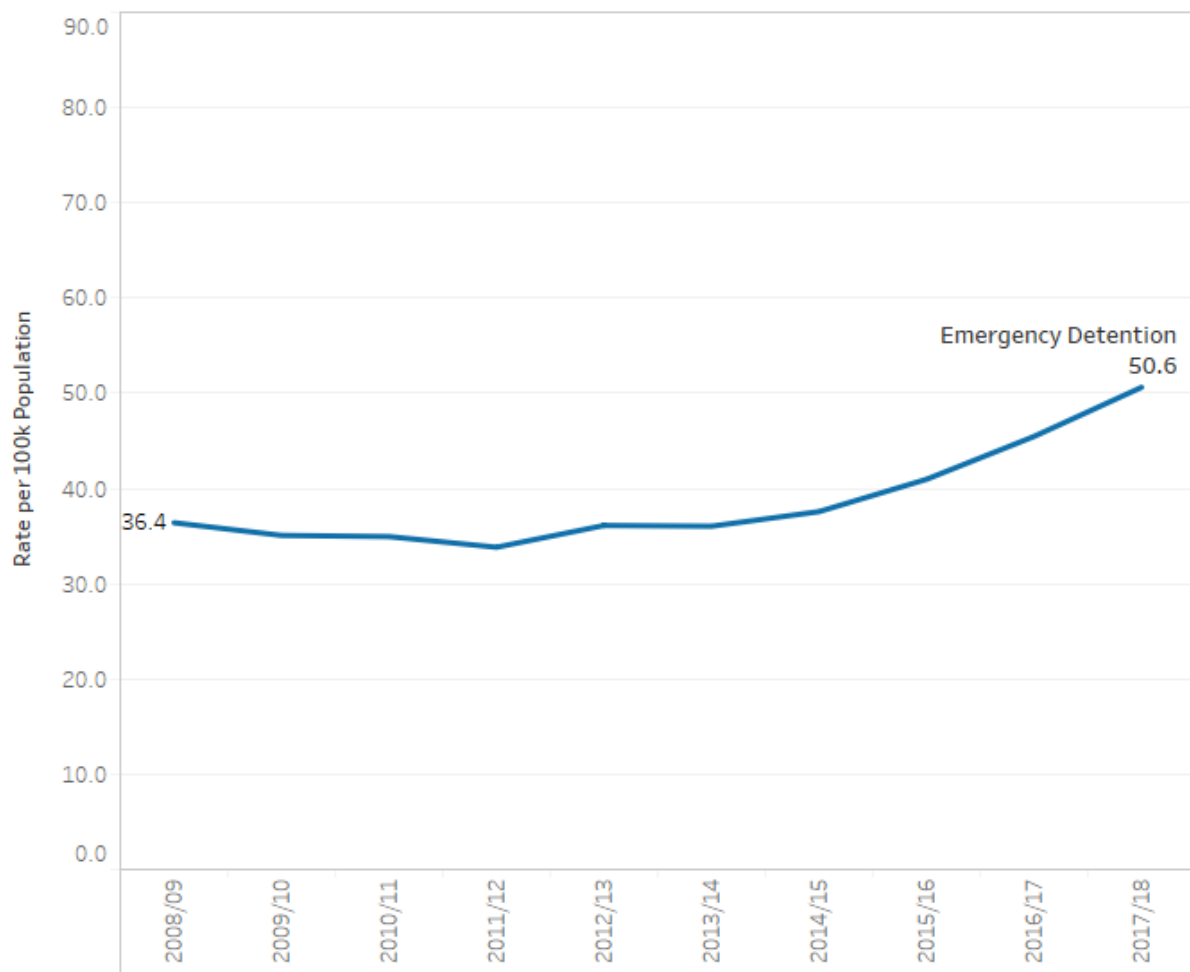
Over the past year:

- STDC rate has risen much more slowly, by 0.6% from 81 to 81.5.
- CTO rate has risen by 6.9% from 24.5 to 26.2.

Emergency detention certificates (EDCs)

Scotland Emergency Detention Certificates - 2008/09 - 2017/18

Rate per 100,000 population

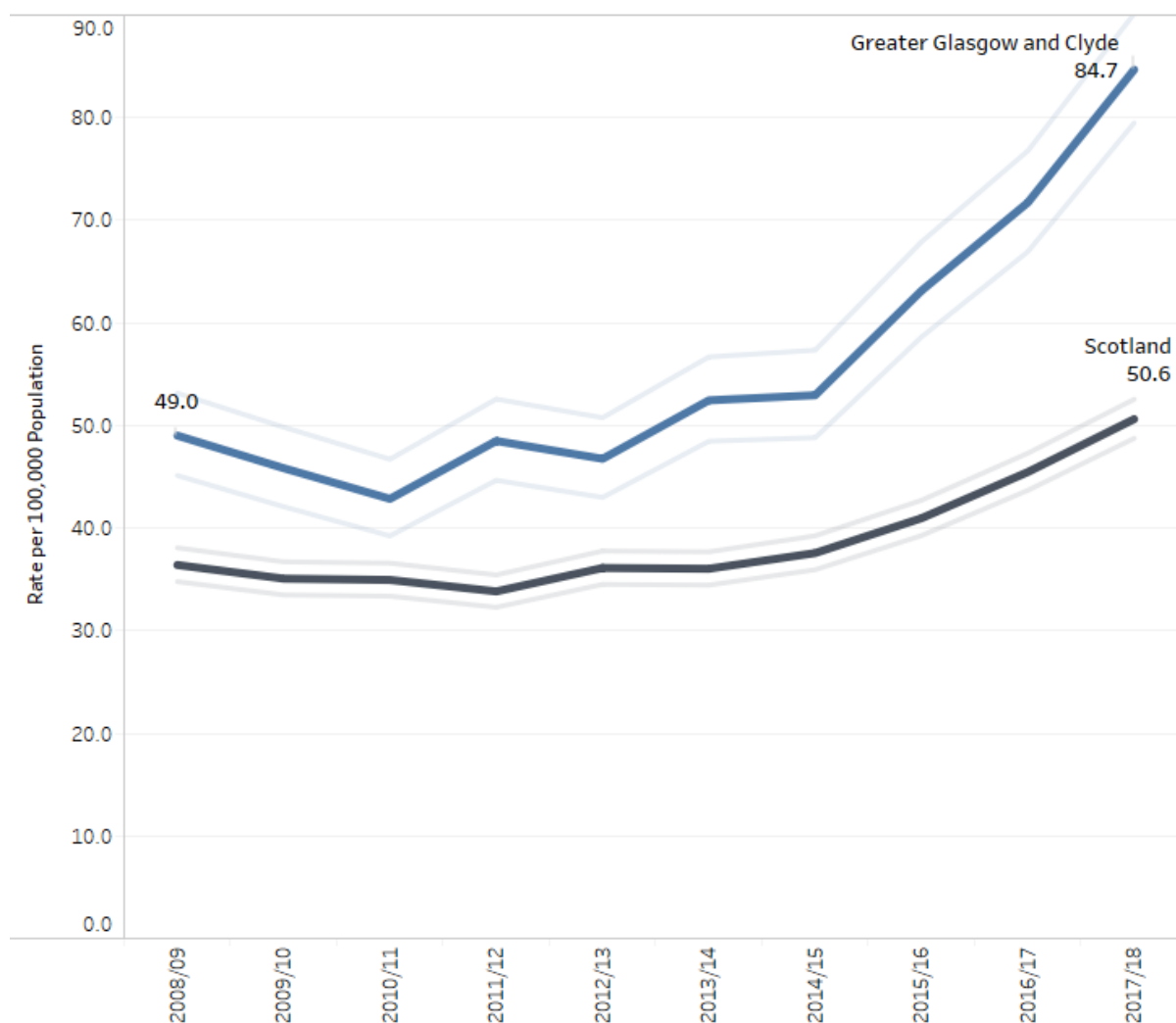


The number of EDCs completed per year has increased by 45.0% (1,894 to 2,746) over the ten-year period.

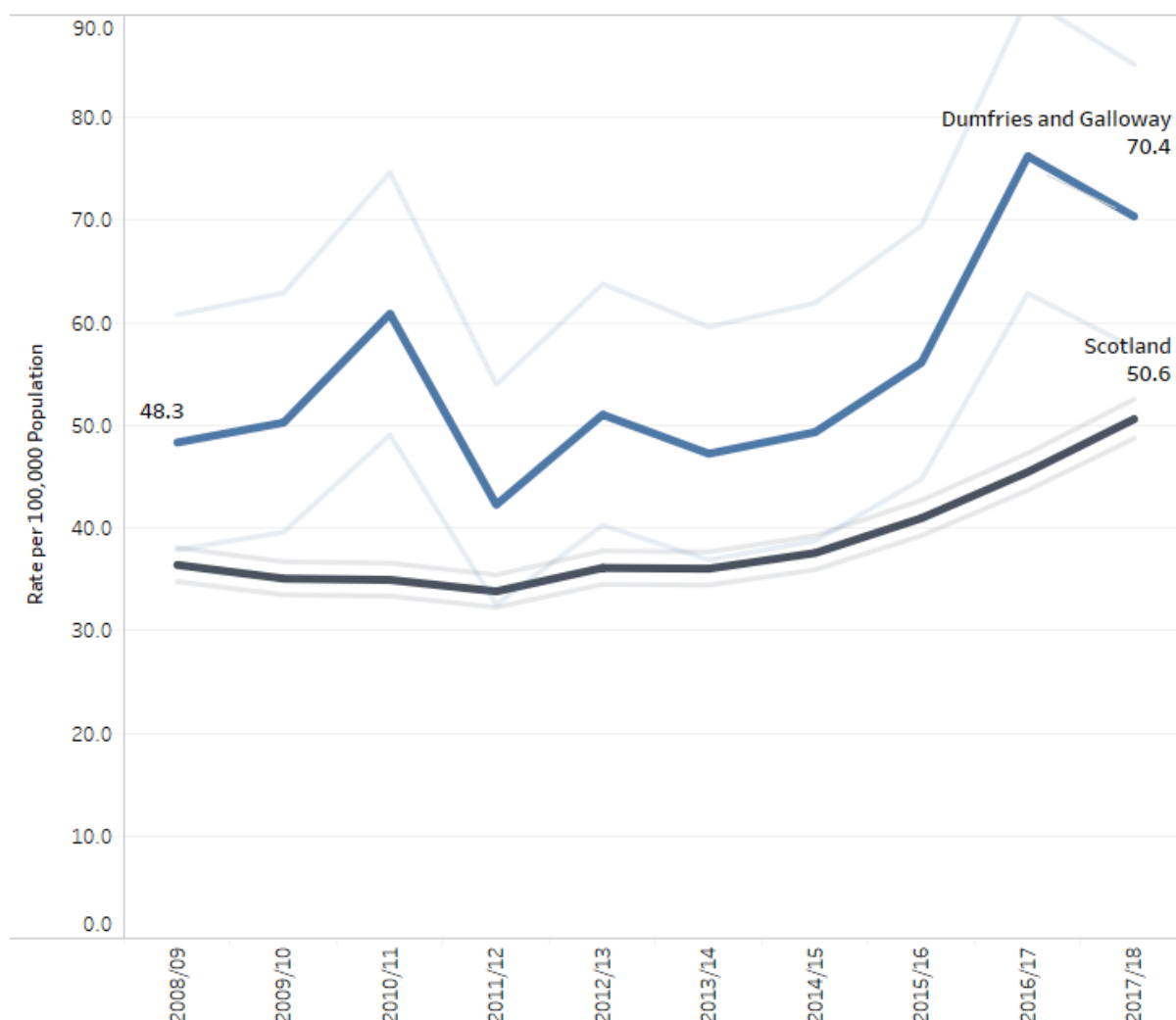
The national rate has risen from 36.4 to 50.6 per 100,000 population. After a low of 33.8 in 2011/12 it has risen steadily, rising by 11.2% in the last year from 45.5 to 50.6.

The following charts show the NHS boards which are significantly above or below the national average.

EDCs Greater Glasgow and Clyde & Scotland 2008/09 - 2017/18
Rate per 100,000 (95% CI)



EDCs Dumfries and Galloway & Scotland 2008/09 - 2017/18
Rate per 100,000 (95% CI)

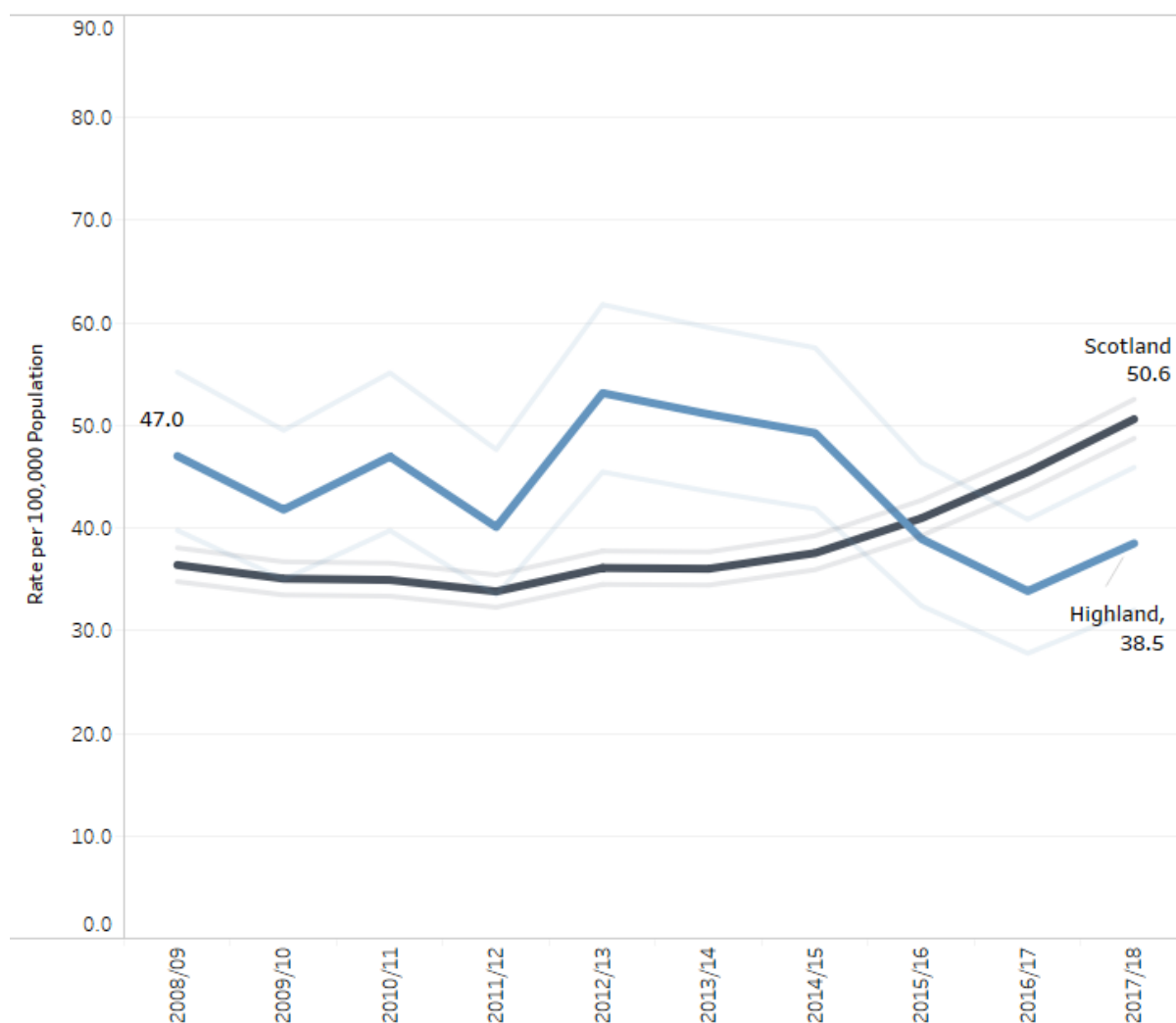


All health boards have shown considerable variation in rates per 100,000 population over the ten-year period.

Over the ten years the Greater Glasgow and Clyde rate has consistently been above the Scotland rate, with a steep rising trend over the past five years to 84.7 in 2017/18.

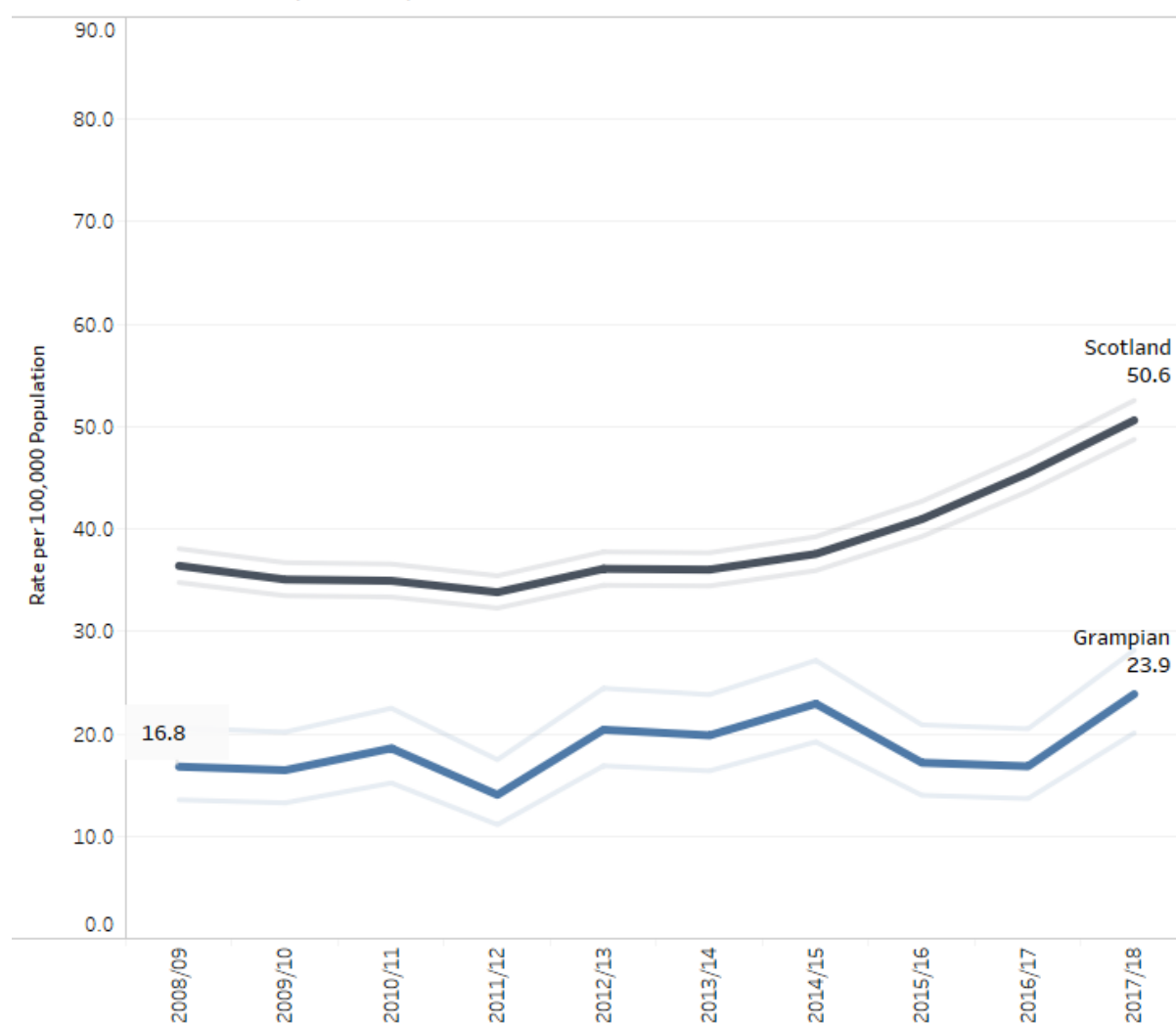
A confidence interval gives a measure of the precision of a value. It shows the range of values that encompass the population or 'true' value, estimated by a certain statistic, with a given probability. For example, if 95% confidence intervals are used, this means we can be sure that the true value lies within these intervals 95% of the time.

EDCs Highland & Scotland 2008/09 - 2017/18
Rate per 100,000 (95% CI)

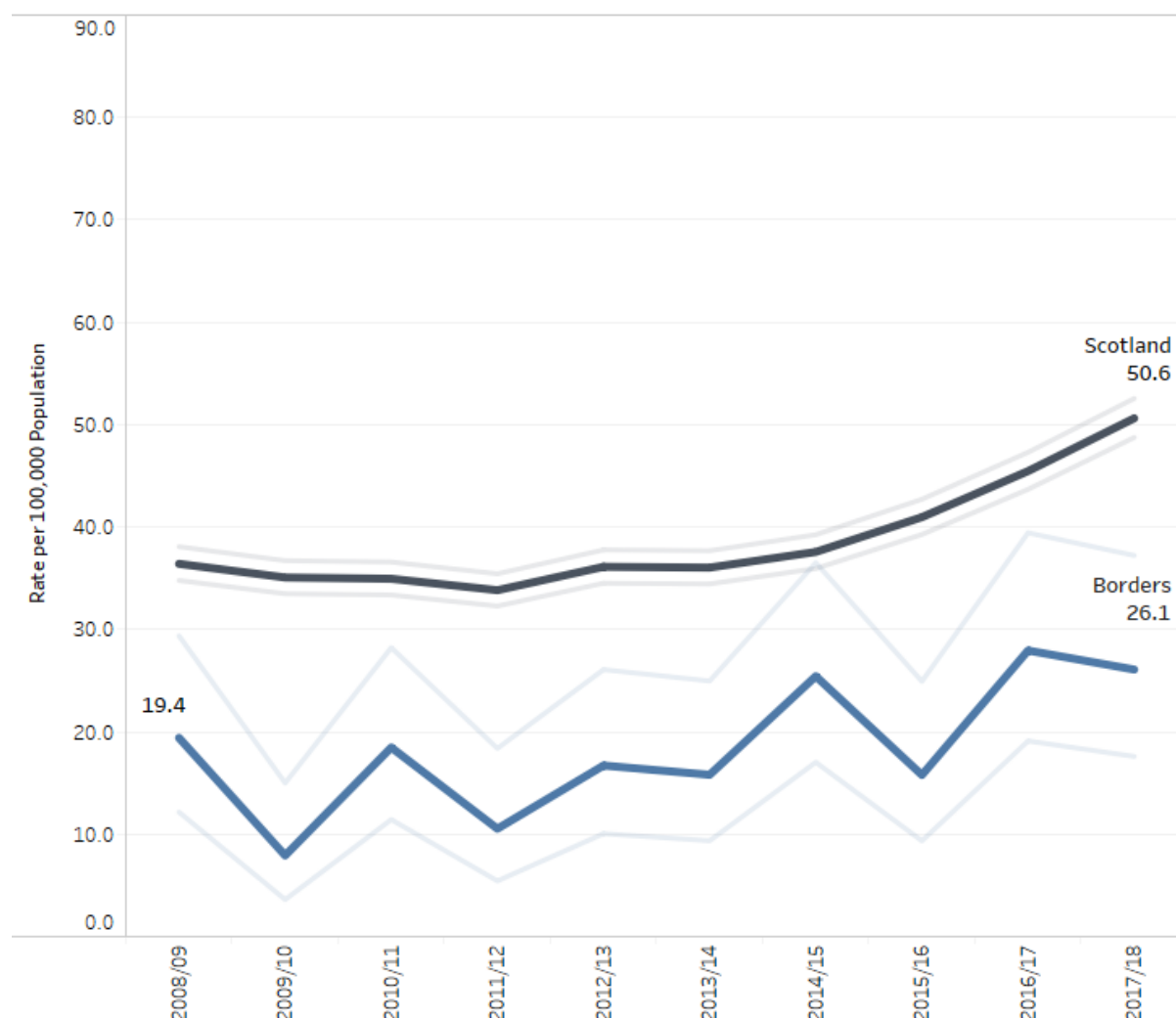


Highland health board has been above the Scotland rate for six out of the ten years, but has been falling since a high of 53.2 in 2012/13.

EDCs Grampian & Scotland 2008/09 - 2017/18
Rate per 100,000 (95% CI)



EDCs Borders & Scotland 2008/09 - 2017/18 Rate per 100,000 (95% CI)

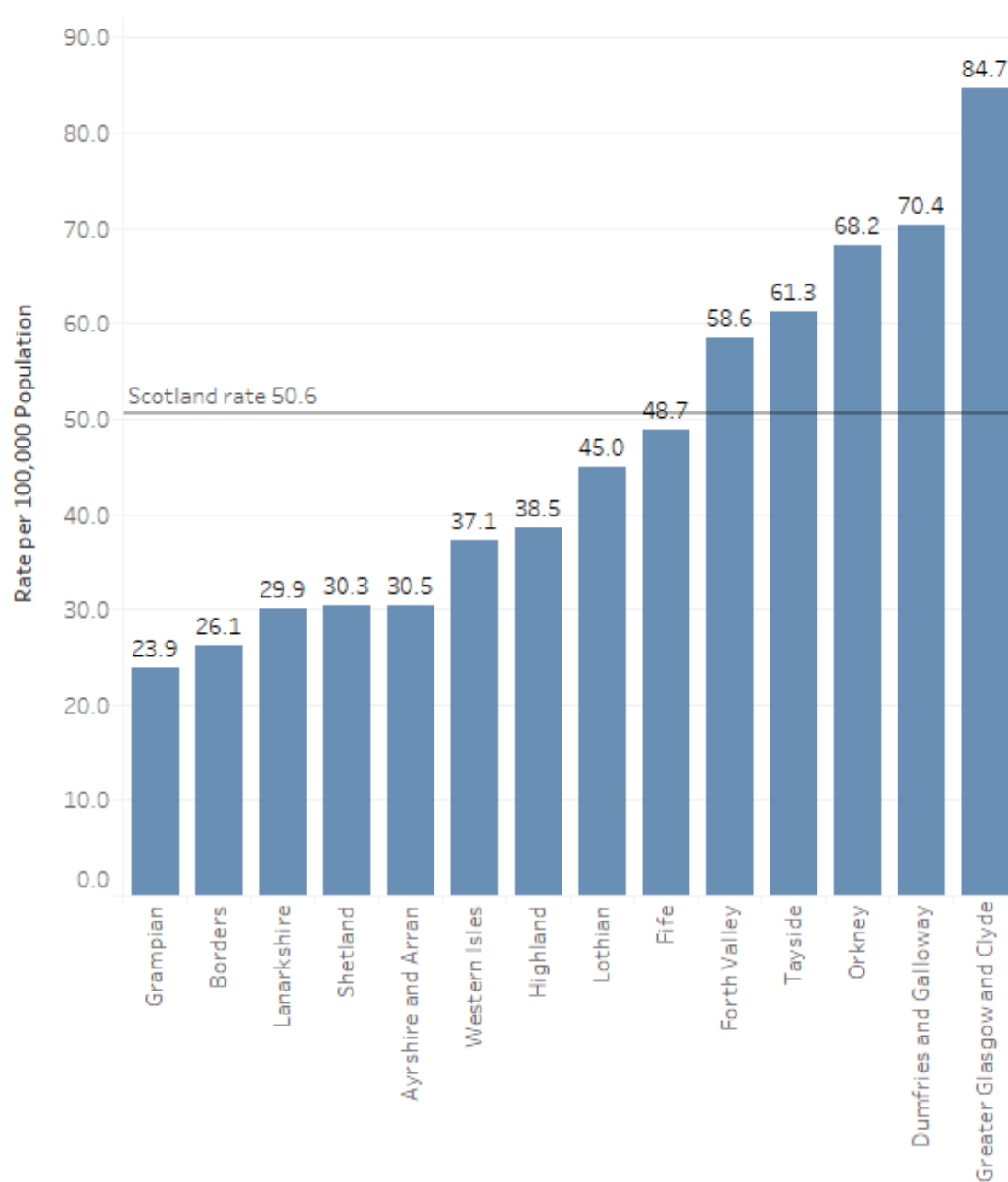


Grampian and Borders have been consistently below the Scotland rate. Borders appears to be rising (19.4 to 26.1) and Grampian has risen in the last year (16.8 to 23.9).

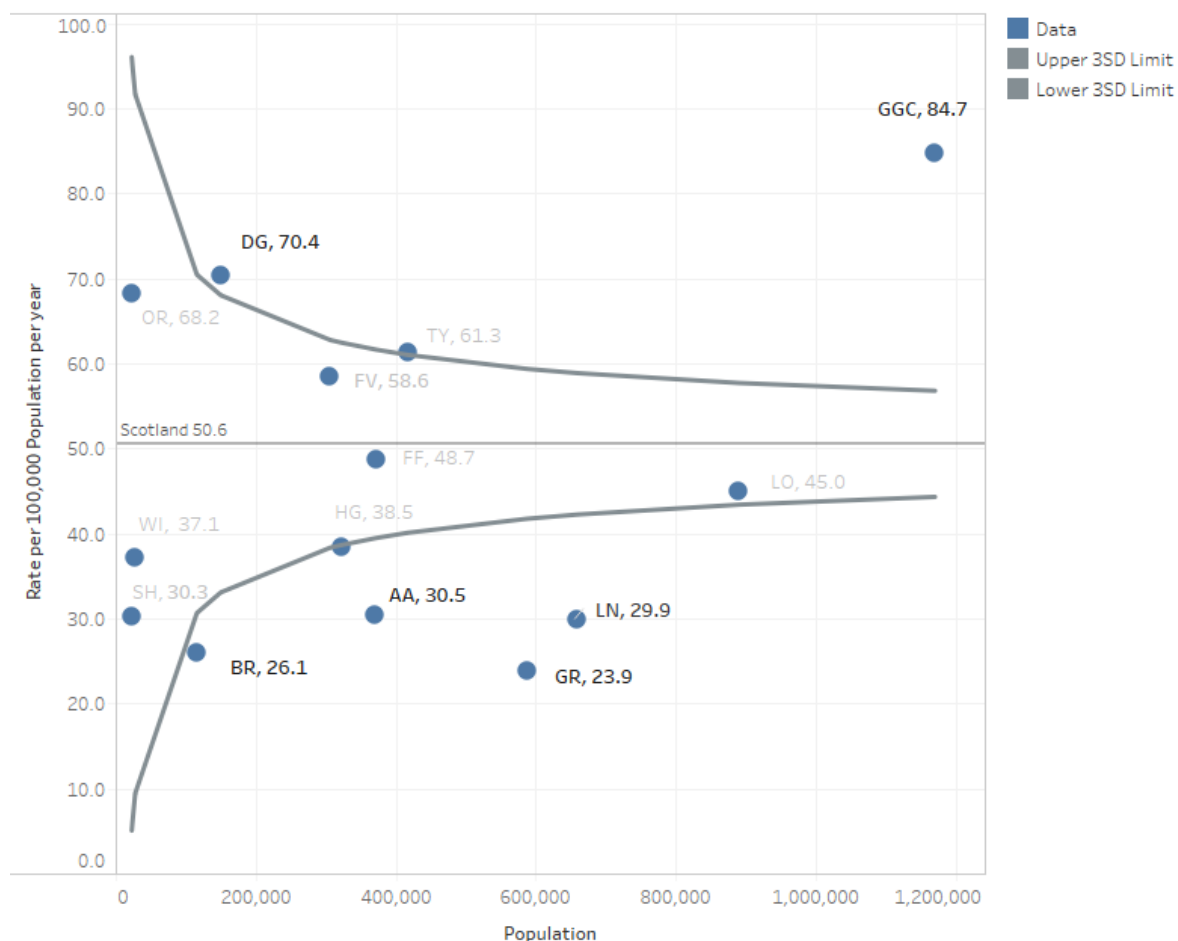
Currently it can be seen that the rate of use of EDCs is 3.5 times higher in Greater Glasgow and Clyde than it is in Grampian.

EDC 2017/18 rates

Emergency Detention Certificates - 2017/18 Health Boards - Rate per 100,000 population



Funnel plot showing rates of Emergency Detention Certificates at NHS board level 2017/18



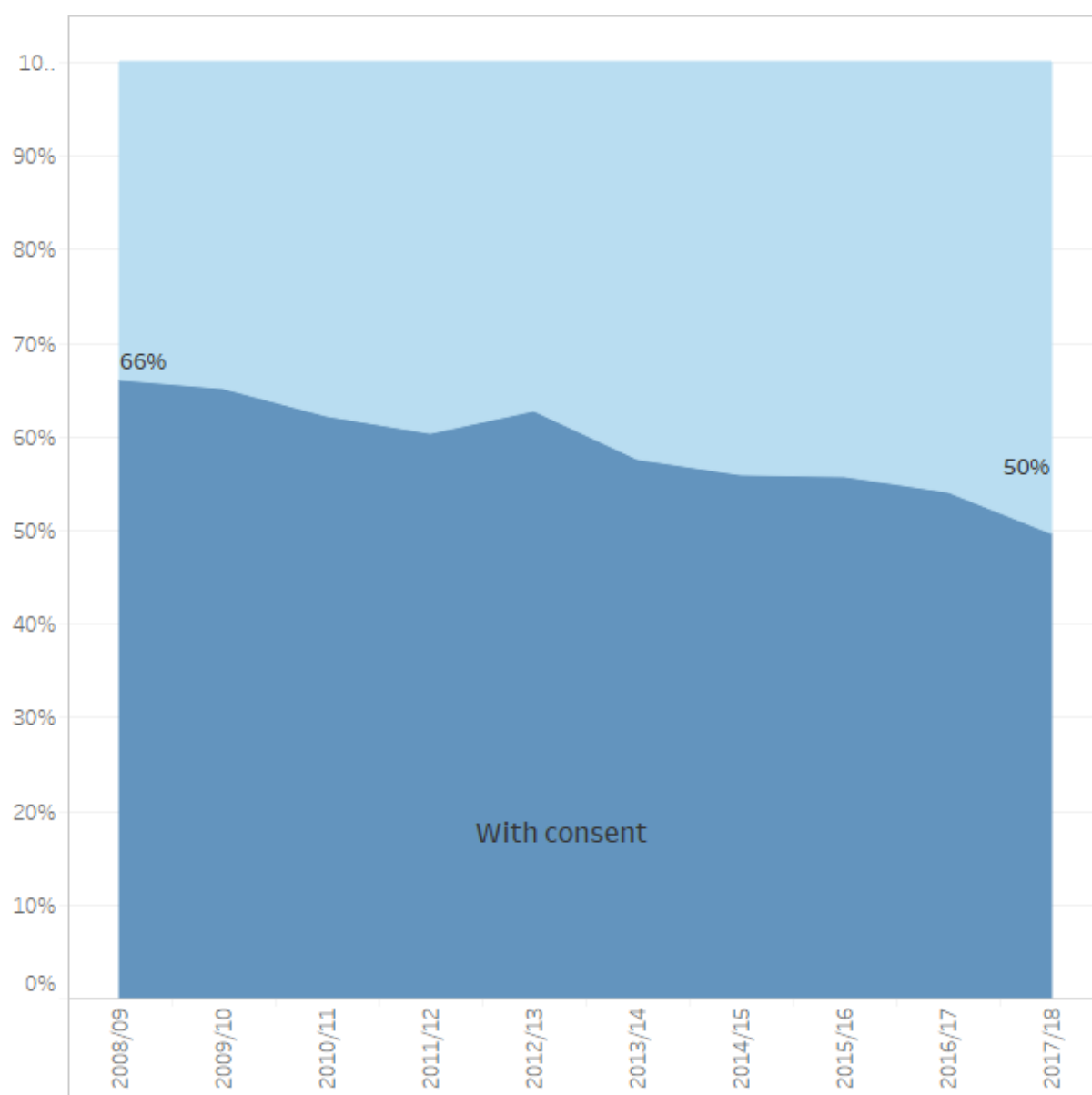
In 2017/18 two local health boards continue to be above the Scotland EDC rate (50.6; 95% CI 48.7 to 52.5).

Greater Glasgow and Clyde (84.7; 95% CI 79.5 to 90.1), which has the largest population, has the highest rate.

Dumfries and Galloway, which has one of the smallest populations, has the second highest rate (70.4; 95% CI 57.6 to 85.2).

In 2017/18 health boards below the Scotland rate are Ayrshire and Arran (30.5; 95% CI 25.1 to 36.7), Lanarkshire (29.9; 95% CI 25.9 to 34.4), Borders (26.1; 95% CI 17.6 to 37.2), and Grampian (23.9; 95% CI 20.1 to 28.2).

EDCs with mental health officer (MHO) consent
Scotland All EDCs 2008/09 - 2017/18
With MHO consent (%)



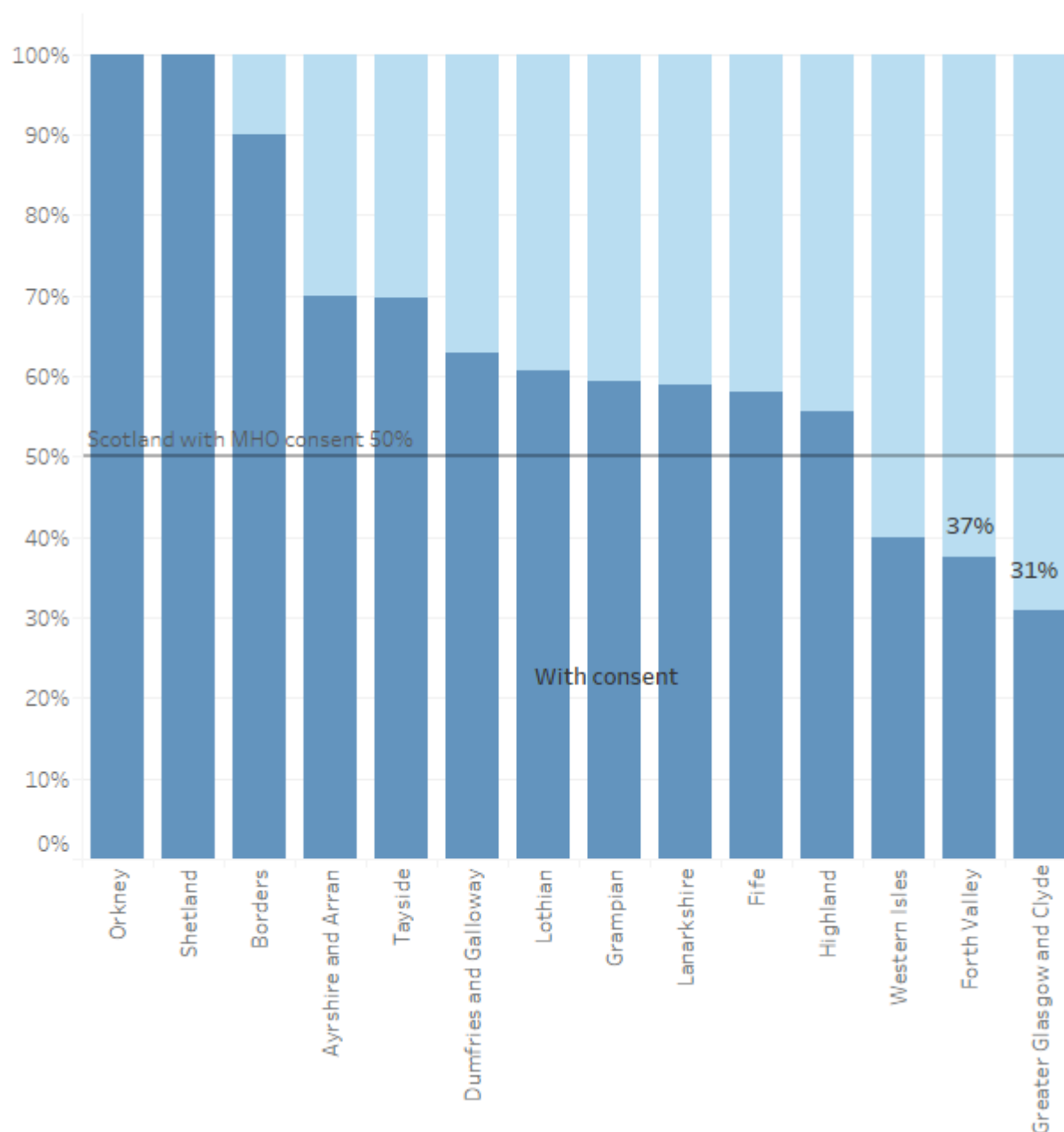
Over the ten-year period, the percentage of EDCs across Scotland **with** MHO consent has fallen from 66% to the current picture of 50%.

In 2017/18, of the 2,746 people across Scotland made subject to an EDC, we found that 50% **did not** have the consent of an MHO.

Percentage of EDCs with MHO consent for all NHS boards 2017/18

All EDCs by Health Board 2017/18

With MHO consent %



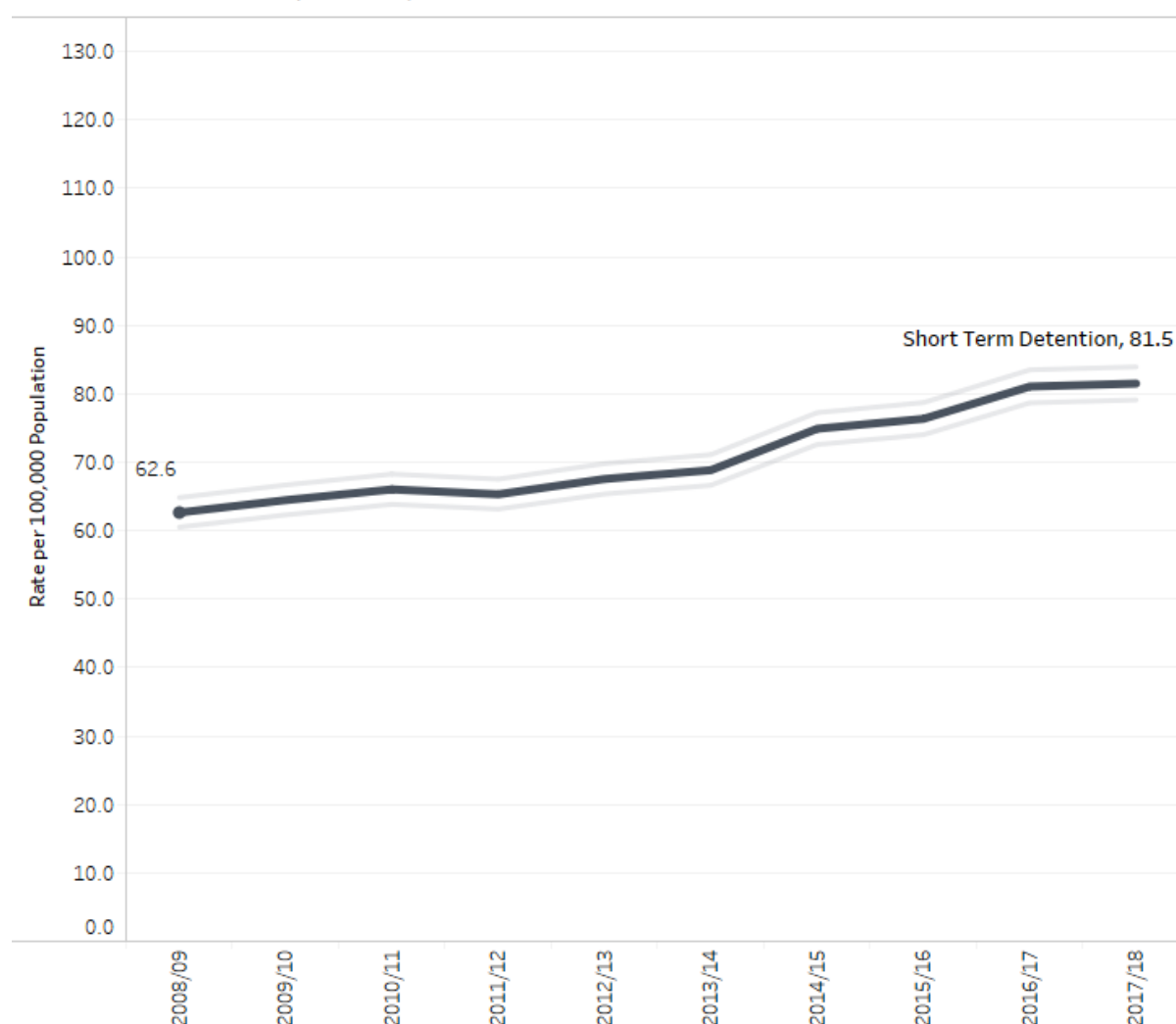
In 2017/18 across Scotland 50% of EDCs had MHO consent.

Of mainland boards, Greater Glasgow and Clyde (31%) and Forth Valley (37%) had lower rates of consent. For Greater Glasgow and Clyde 684 of 990 and for Forth Valley 112 of 179 EDCs did not have consent.

Short term detention certificates (STDCs)

Scotland Short Term Detention Certificates 2008/09 - 2017/18

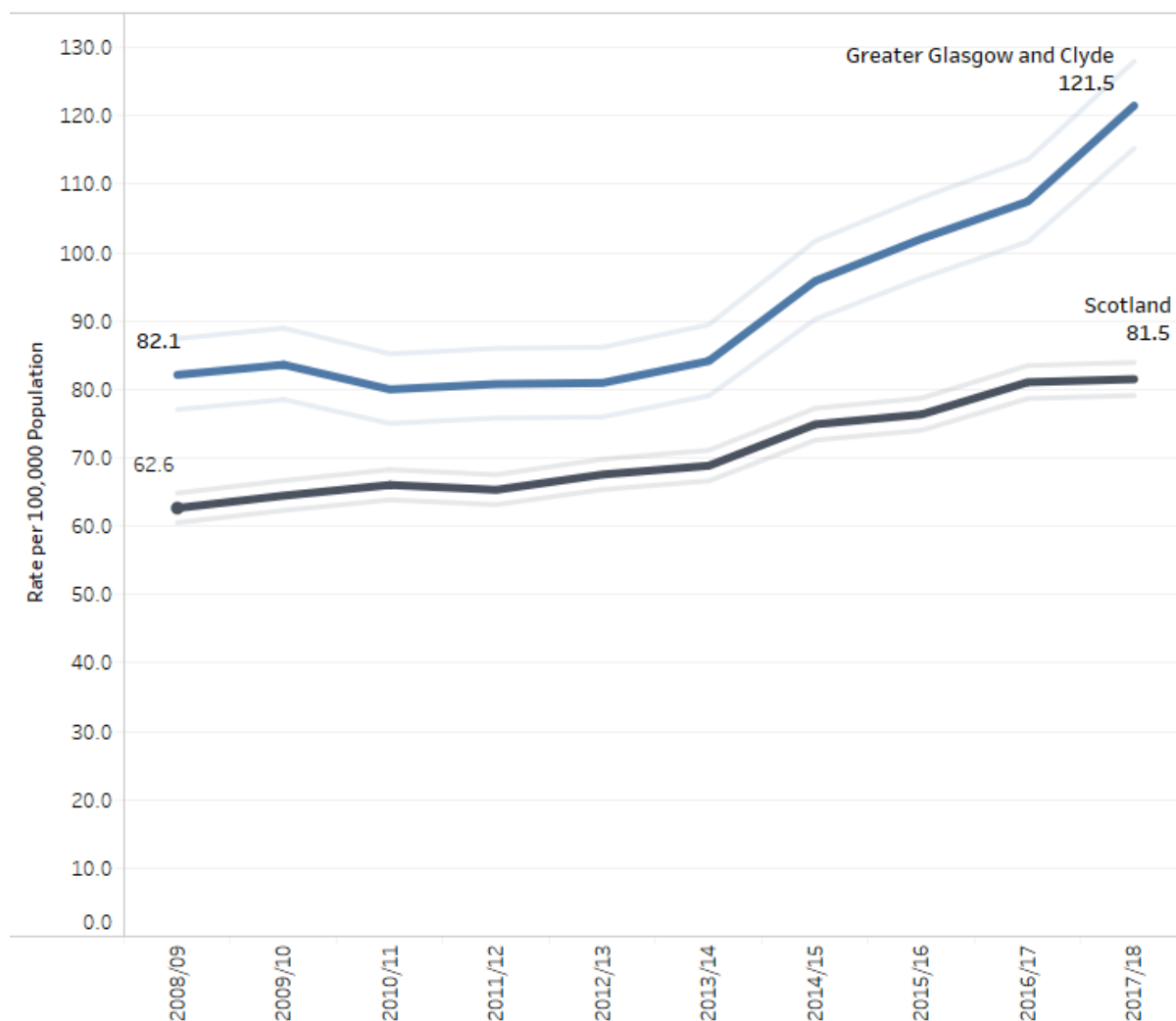
Rate per 100,000 (95% CI)



The number of STDCs completed per year has increased by 35.6% (3,259 to 4,420) over the ten-year period.

The national rate has risen steadily from 62.6 to 81.5 per 100,000 population.

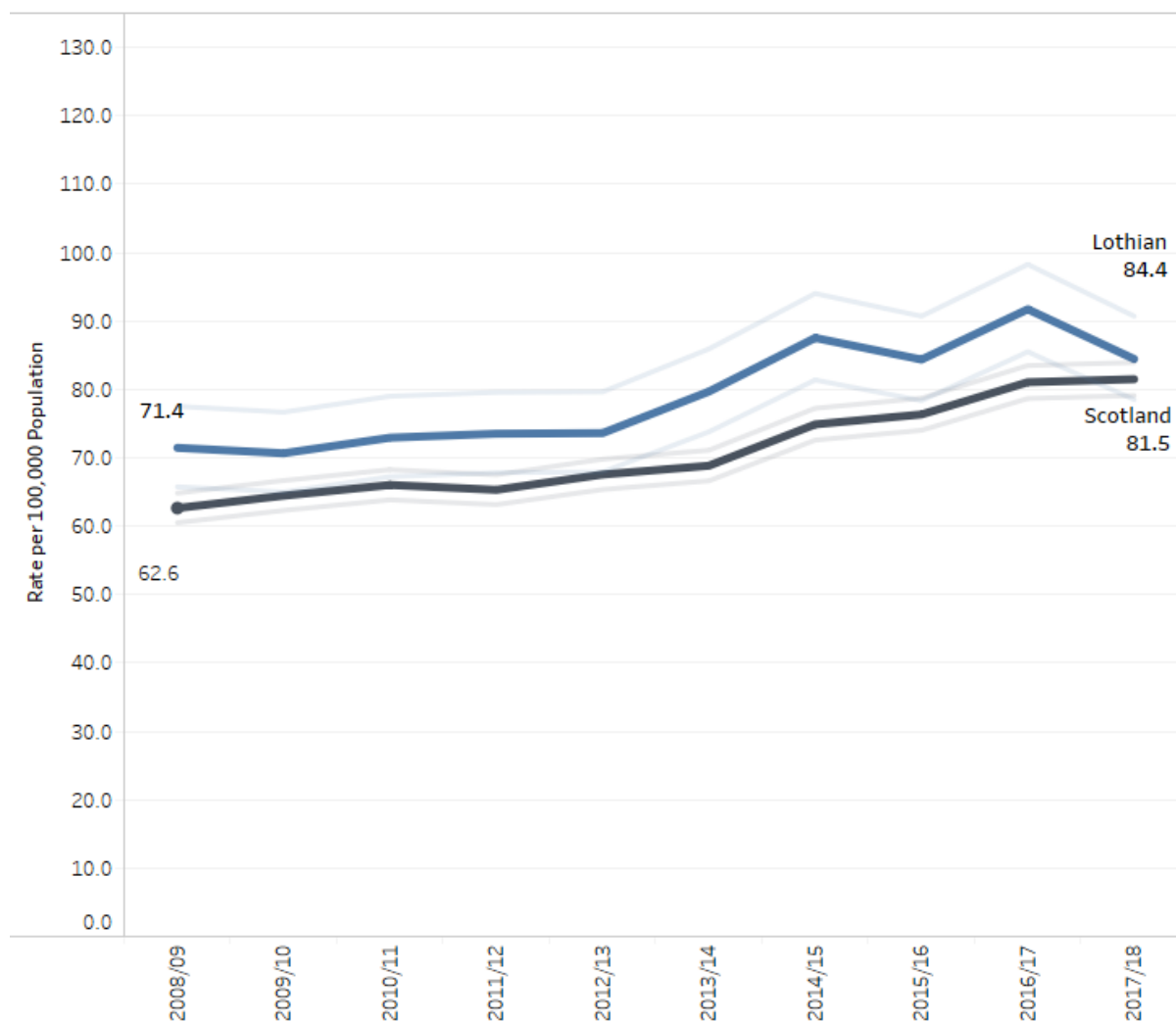
STDCs Greater Glasgow and Clyde & Scotland 2008/09 - 2017/18
Rate per 100,000 (95% CI)



All health boards have shown considerable variation in rates per 100,000 population for STDCs over the ten-year period.

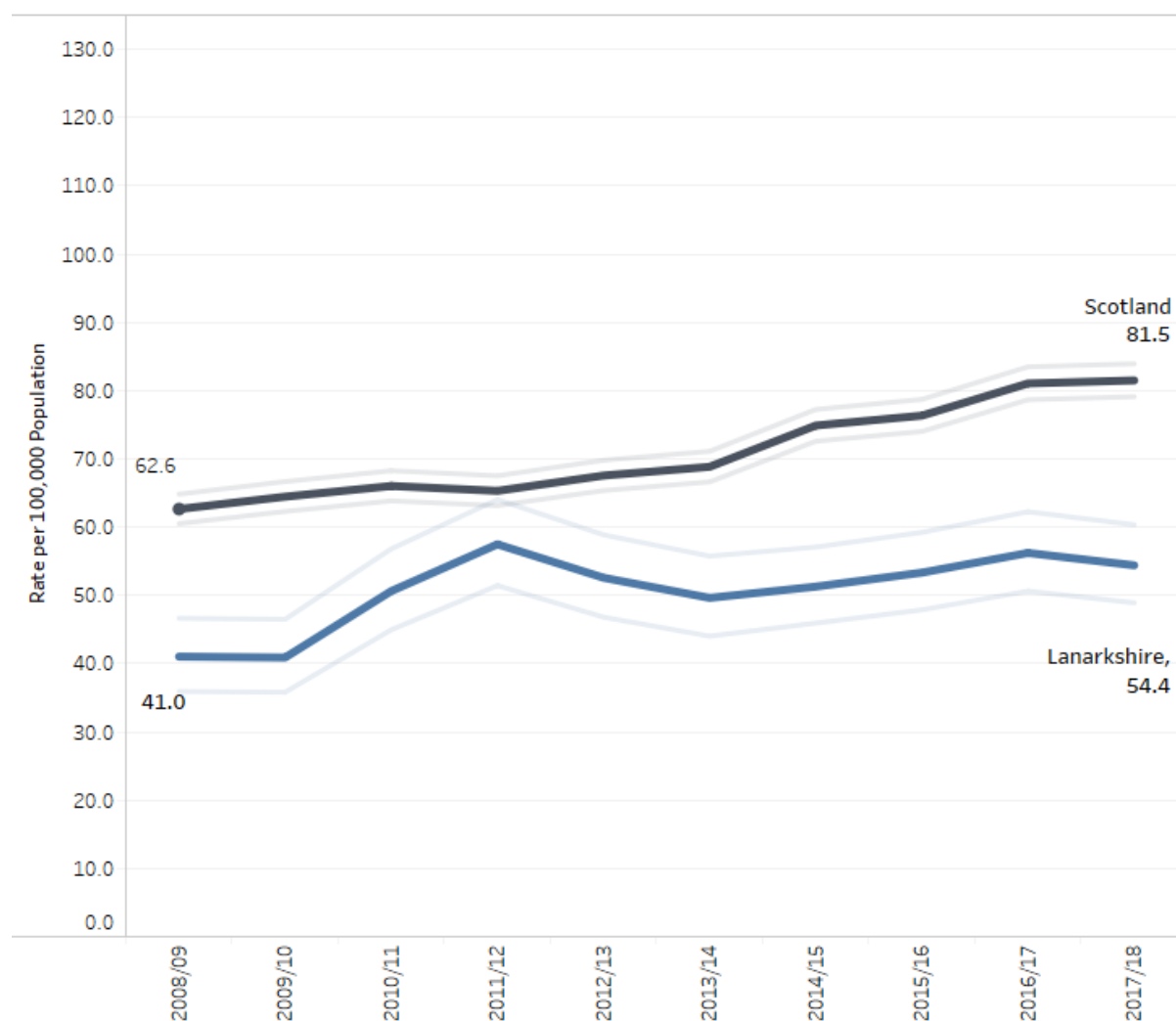
Over the ten years the Greater Glasgow and Clyde rate has consistently been above the Scotland rate, with a steep rising trend over the past five years to 121.5 in 2017/18.

STDCs Lothian & Scotland 2008/09 - 2017/18
Rate per 100,000 (95% CI)

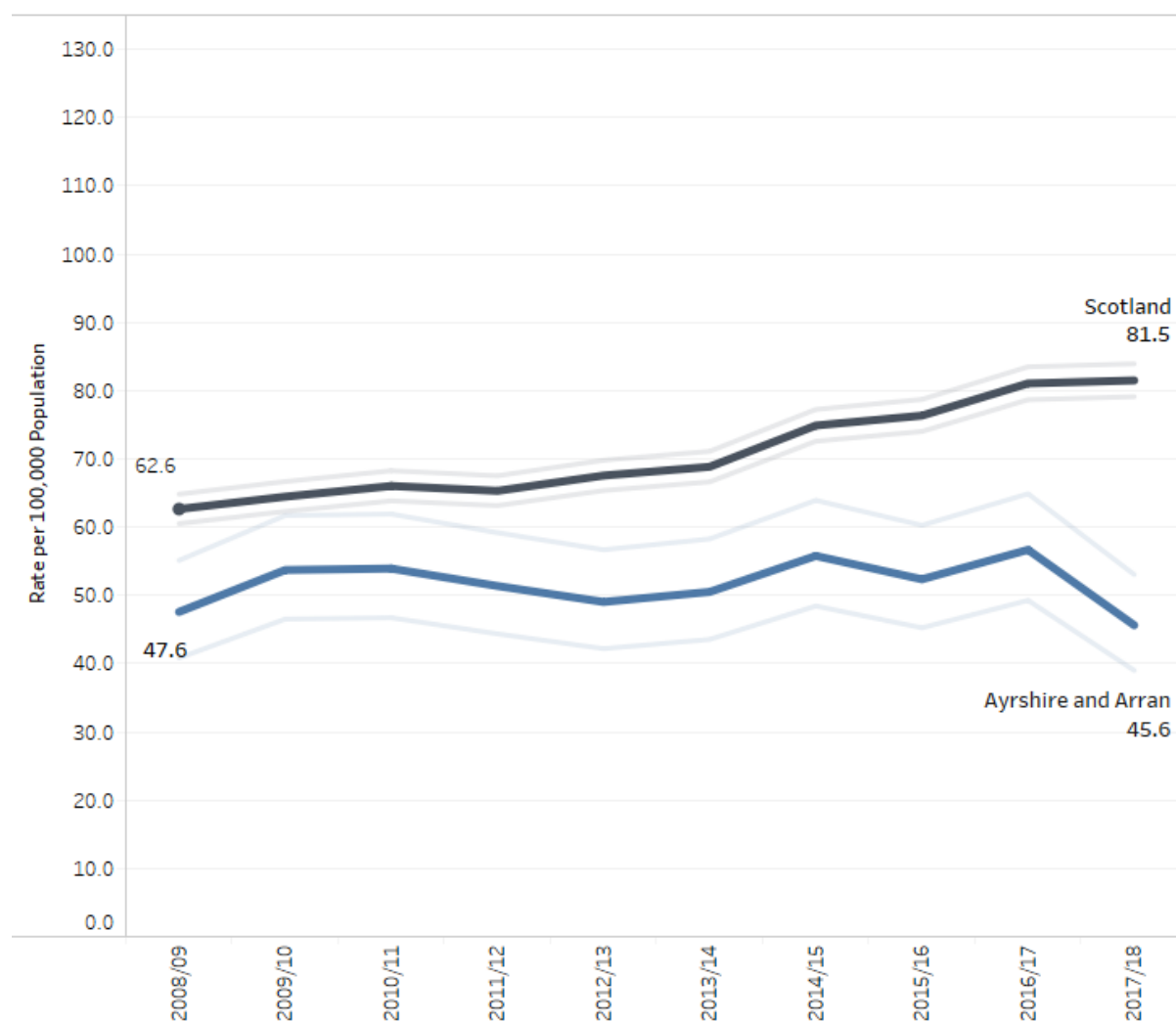


Lothian has also been over the Scotland rate but has dipped in the last year to 84.4 per 100,000.

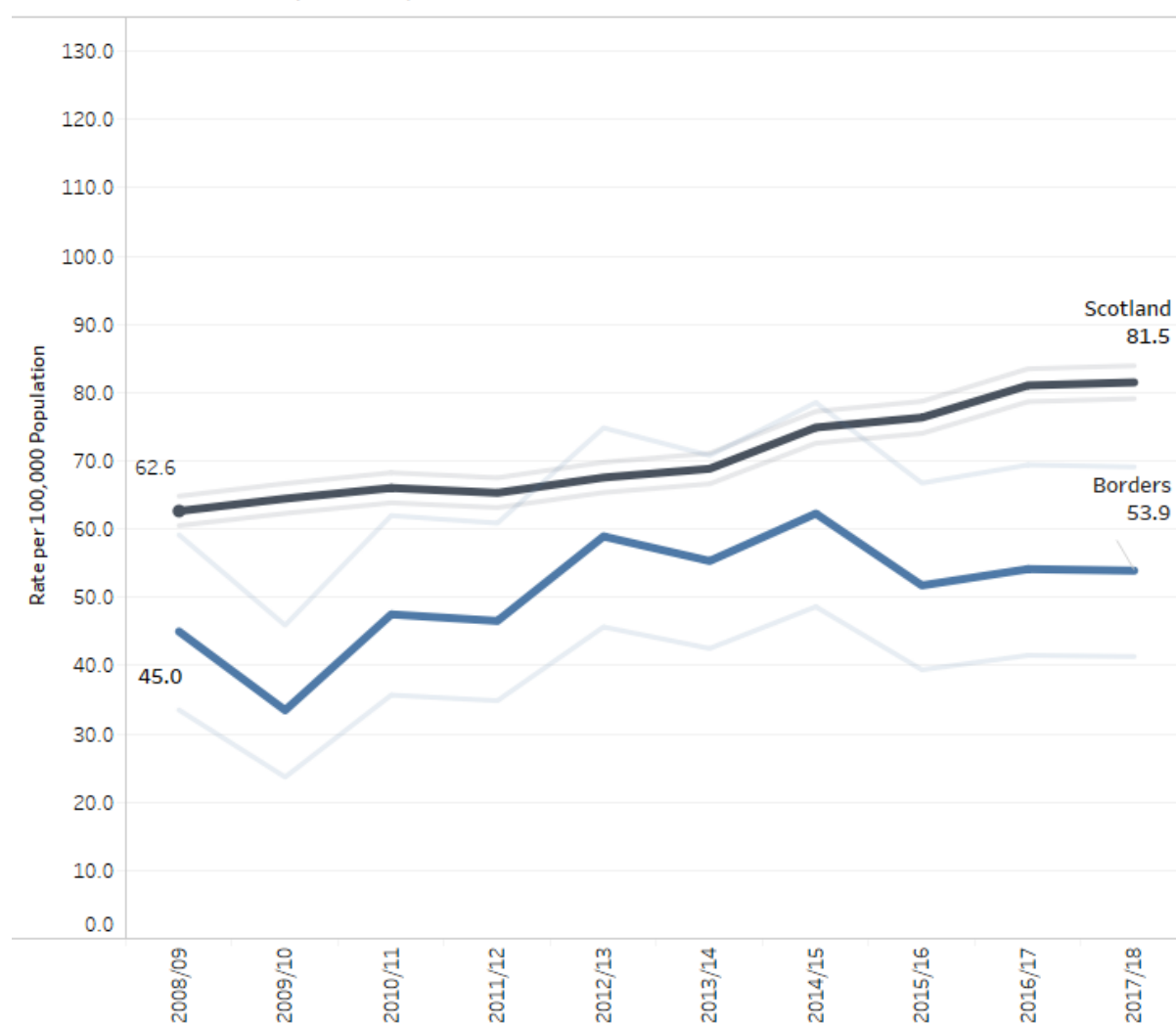
STDCs Lanarkshire & Scotland 2008/09 - 2017/18 Rate per 100,000 (95% CI)



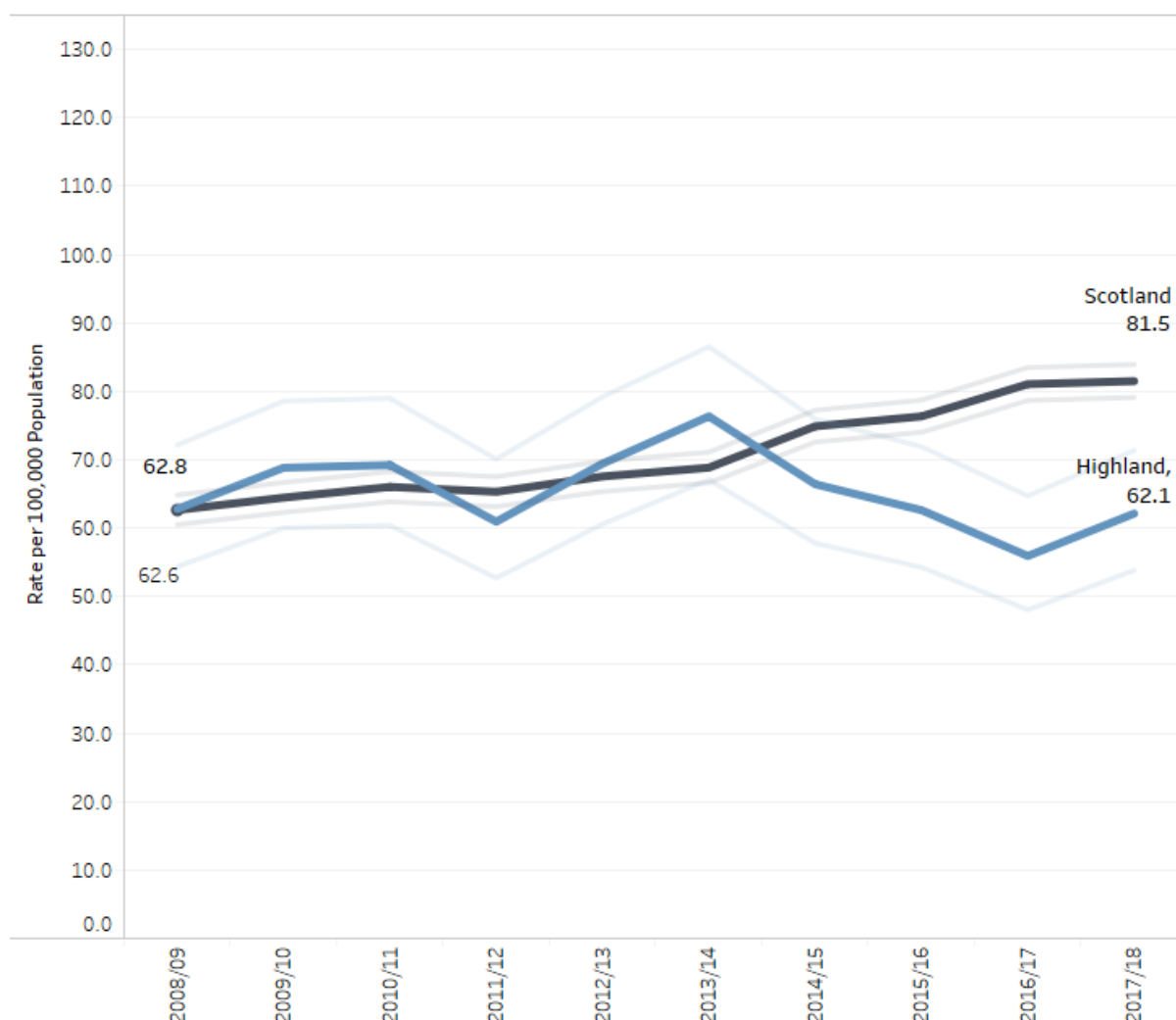
STDCs Ayrshire and Arran & Scotland 2008/09 - 2017/18
Rate per 100,000 (95% CI)



STDCs Borders & Scotland 2008/09 - 2017/18 Rate per 100,000 (95% CI)



STDCs Highland & Scotland 2008/09 - 2017/18 Rate per 100,000 (95% CI)



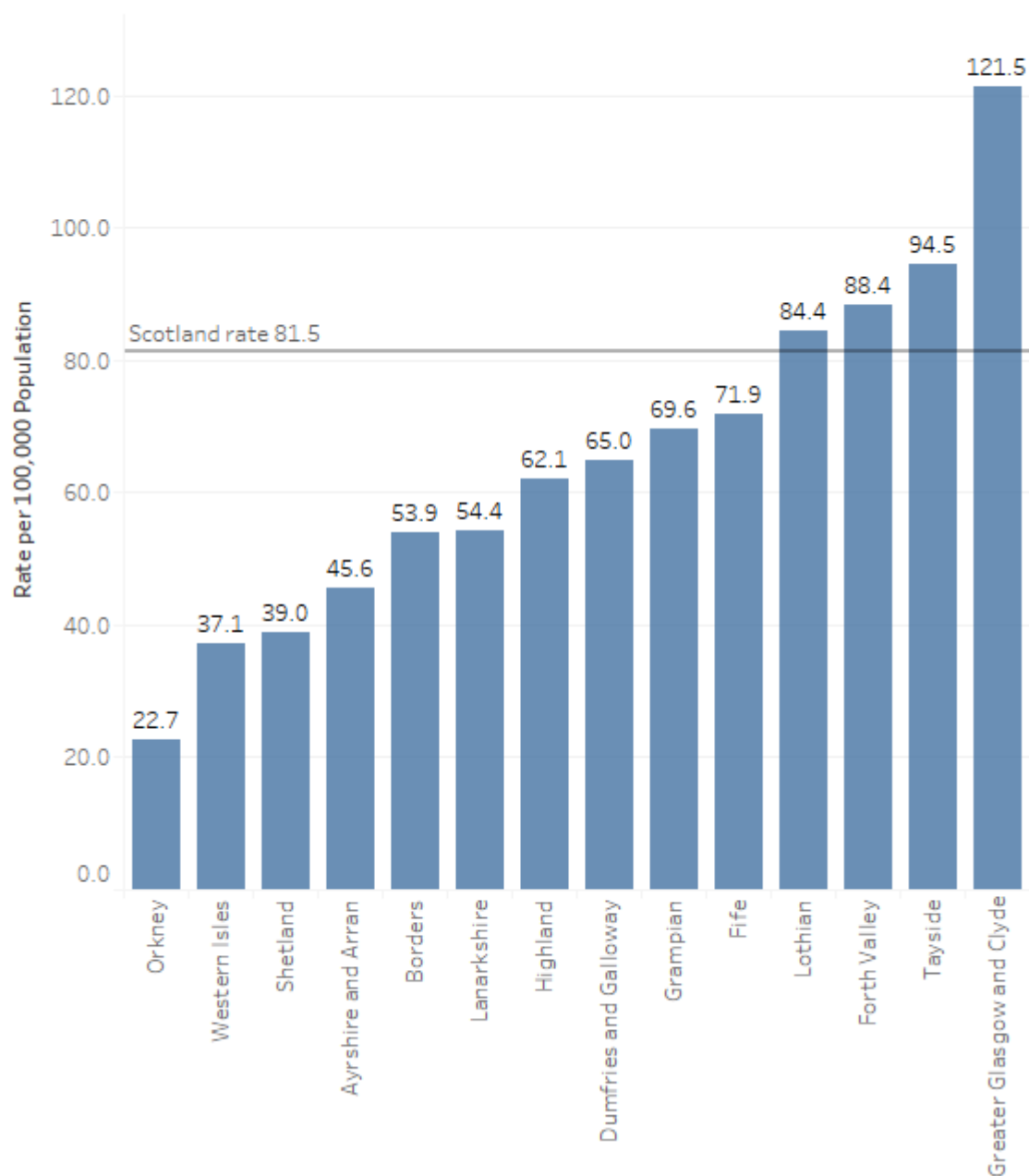
Three health boards have continued lower than the national rate over the ten-year period Borders, Lanarkshire, and Ayrshire and Arran. Both Lanarkshire (54.4) and Ayrshire and Arran (45.6) have shown a decrease in the last year.

Highland has been below the Scotland rate for the past four years but has risen this year (62.1).

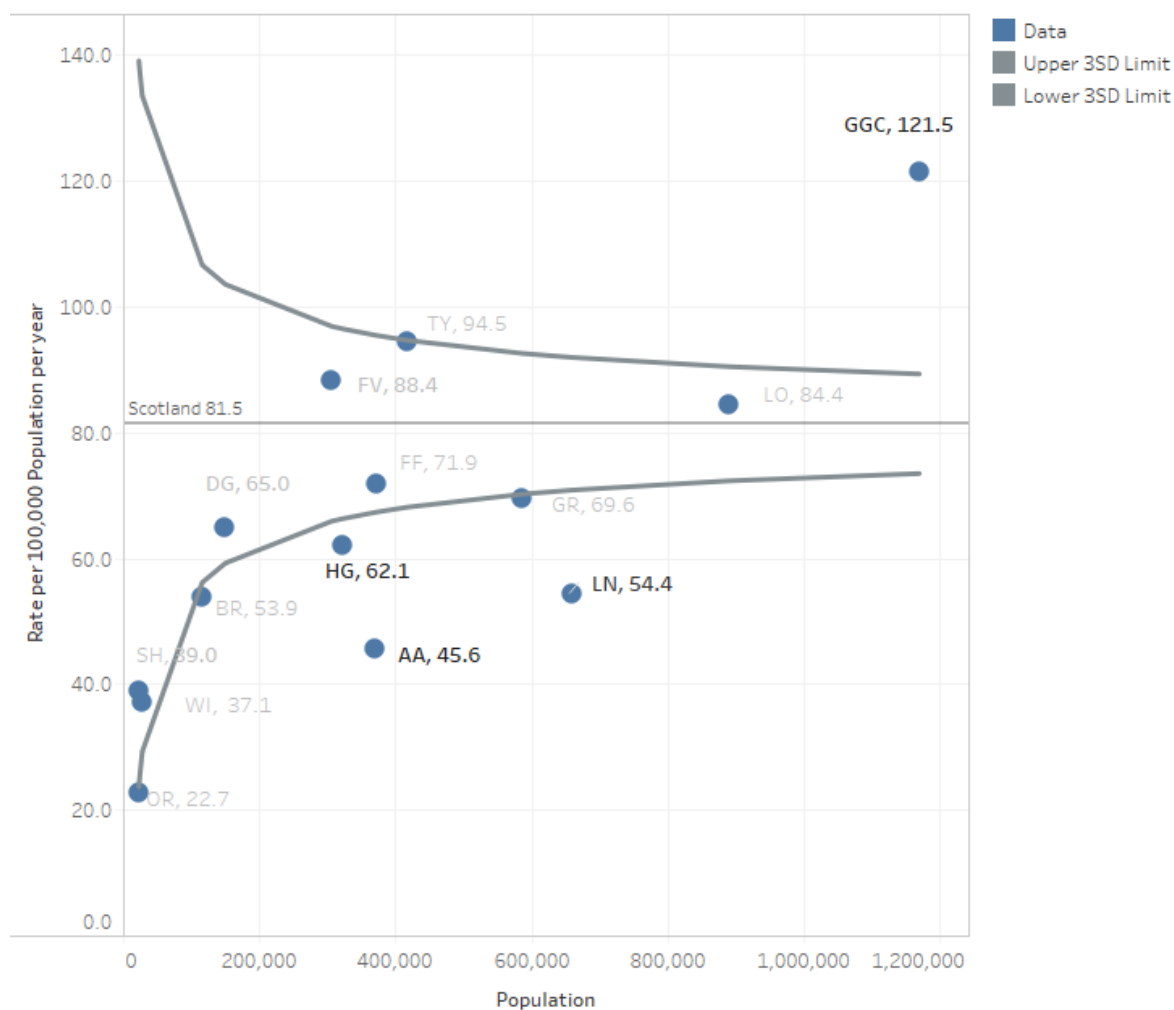
STDCs 2017/18 rates

Short Term Detention - 2017/18

Health Boards - Rate per 100,000 population



Funnel plot showing rates of Short Term Detention
at NHS board level 2017/18



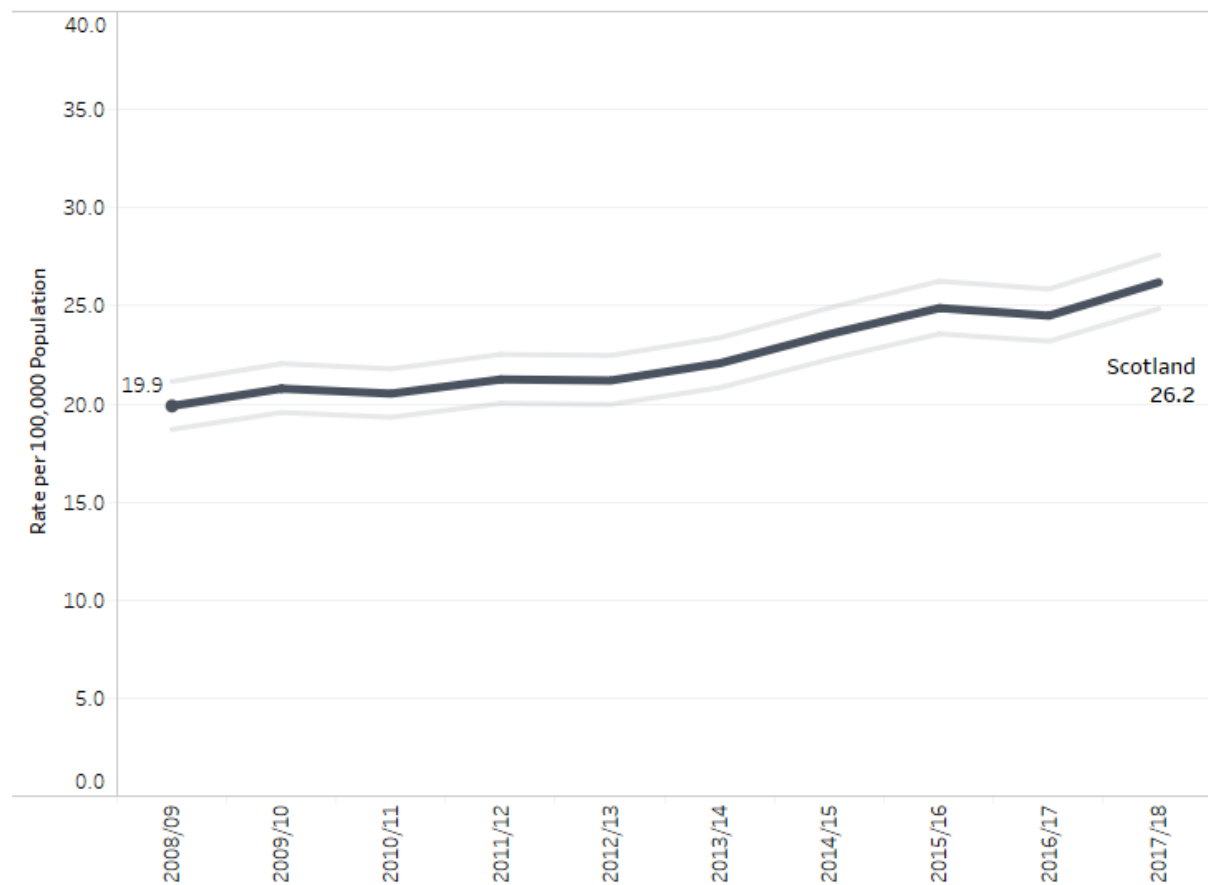
In 2017/18 Greater Glasgow and Clyde (121.5; 95% CI 115.2 to 127.9) continued to be above the Scotland STDC rate (81.5; 95% CI 79.1 to 83.9).

In 2017/18 health boards below the Scotland rate are Highland (62.1), Lanarkshire (54.4), and Ayrshire and Arran (45.6).

Compulsory treatment orders (CTOs)

Scotland Compulsory Treatment Orders 2008/09 - 2017/18

Rate per 100,000 (95% CI)

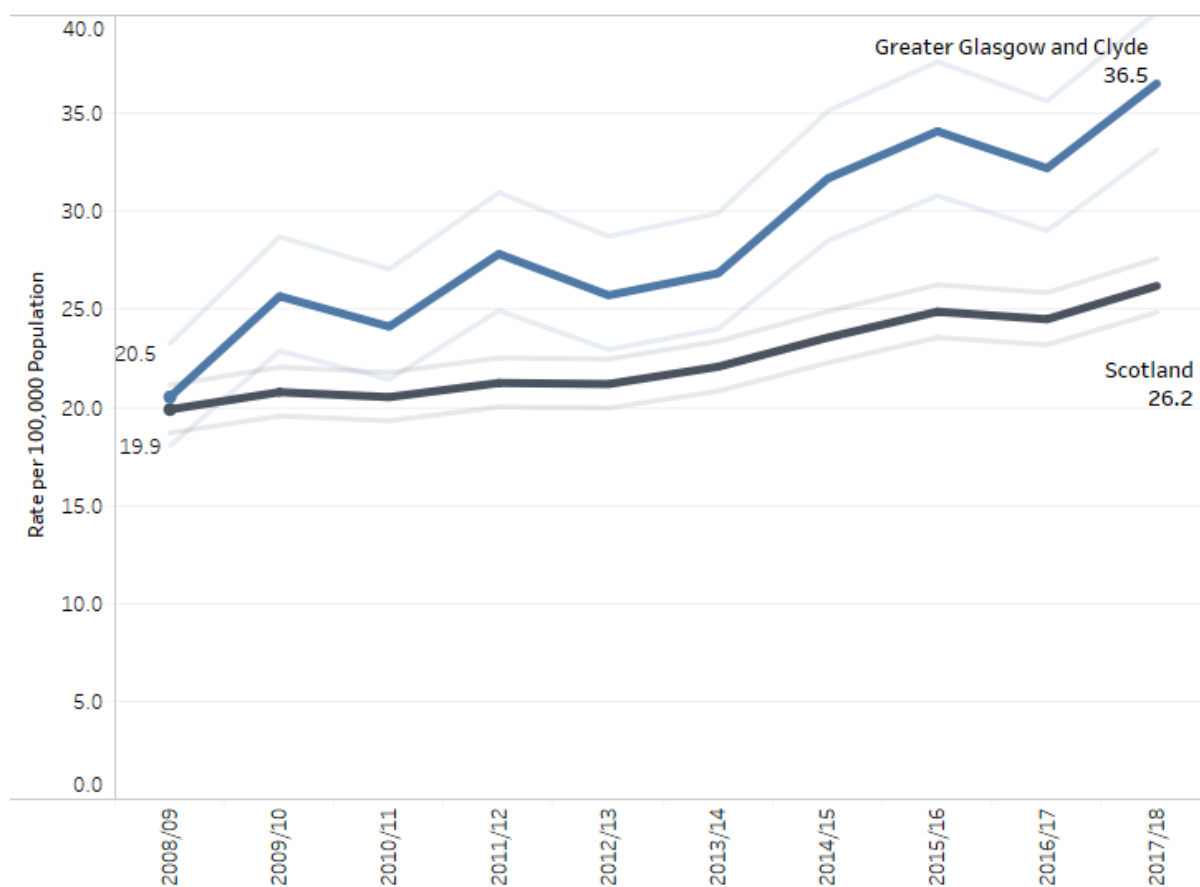


Includes hospital and community CTOs (all interim orders are excluded)

The number of CTOs completed per year has increased by 37.3% (1,035 to 1,421) over the ten-year period.

The national rate for compulsory treatment orders has been rising steadily over the past ten years (from 19.9 to 26.2 per 100,000). The rate of increase is slower than for EDCs or STDCs.

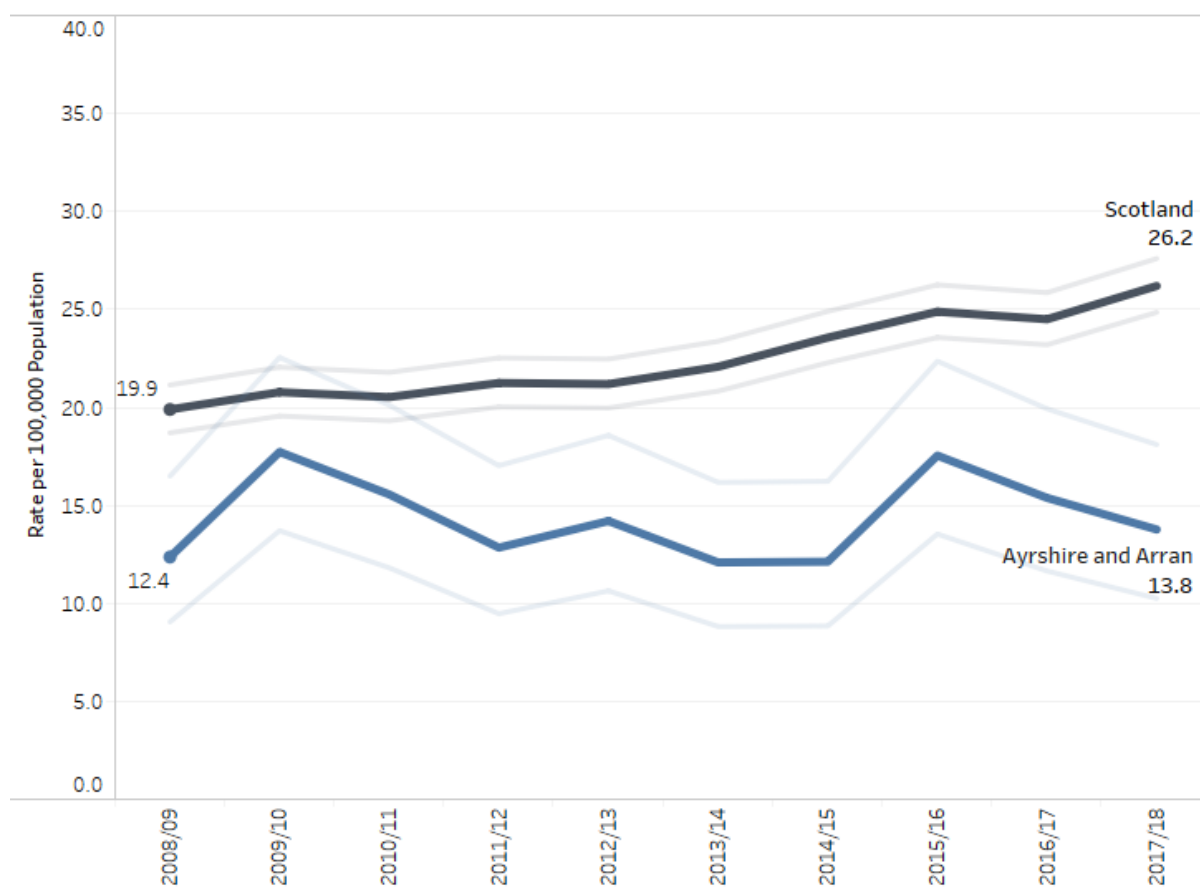
CTOs Greater Glasgow and Clyde & Scotland 2008/09 - 2017/18
Rate per 100,000 (95% CI)



Includes hospital and community CTOs (all interim orders are excluded)

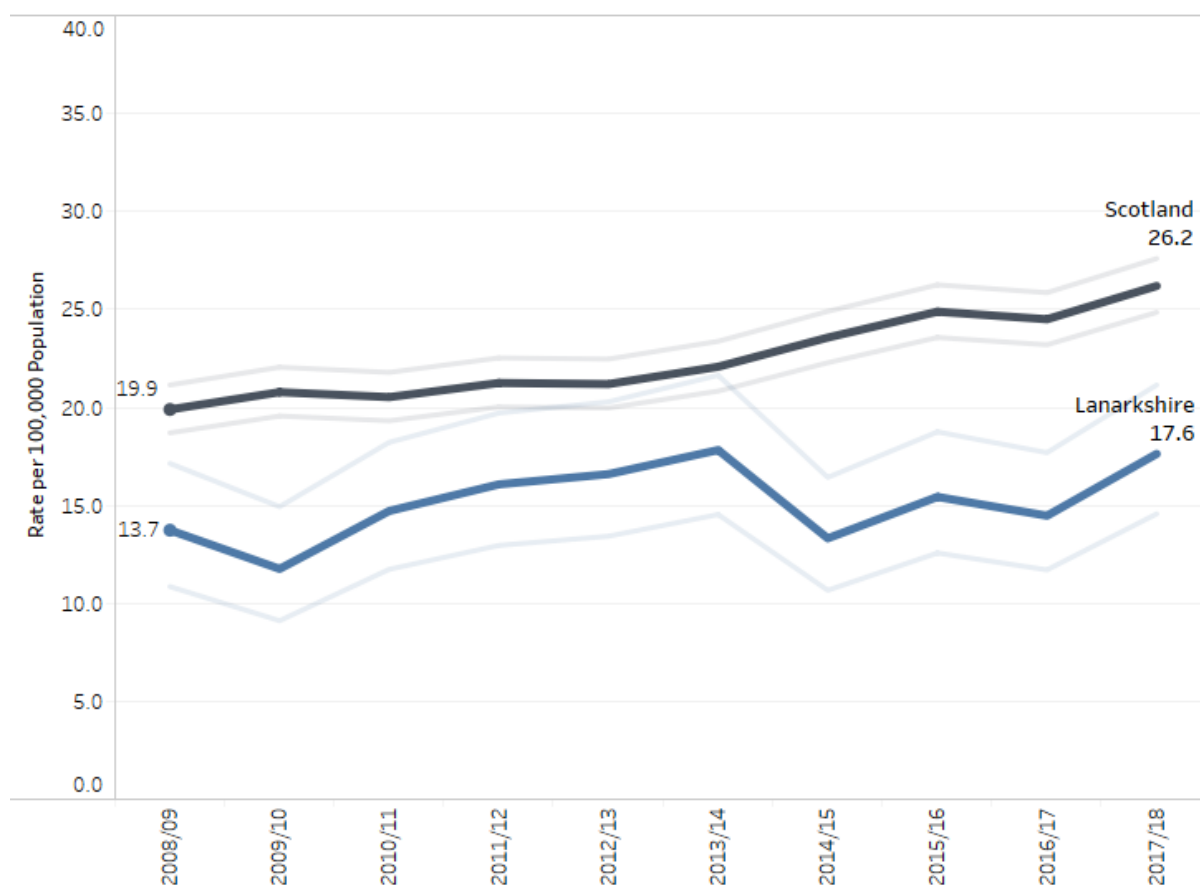
Since 2009 the rate for Greater Glasgow and Clyde has been rising above the Scotland rate. Over the period it has risen from 20.5 to 36.5.

CTOs Ayrshire and Arran & Scotland 2008/09 - 2017/18
Rate per 100,000 (95% CI)



Includes hospital and community CTOs (all interim orders are excluded)

CTOs Lanarkshire & Scotland 2008/09 - 2017/18 Rate per 100,000 (95% CI)



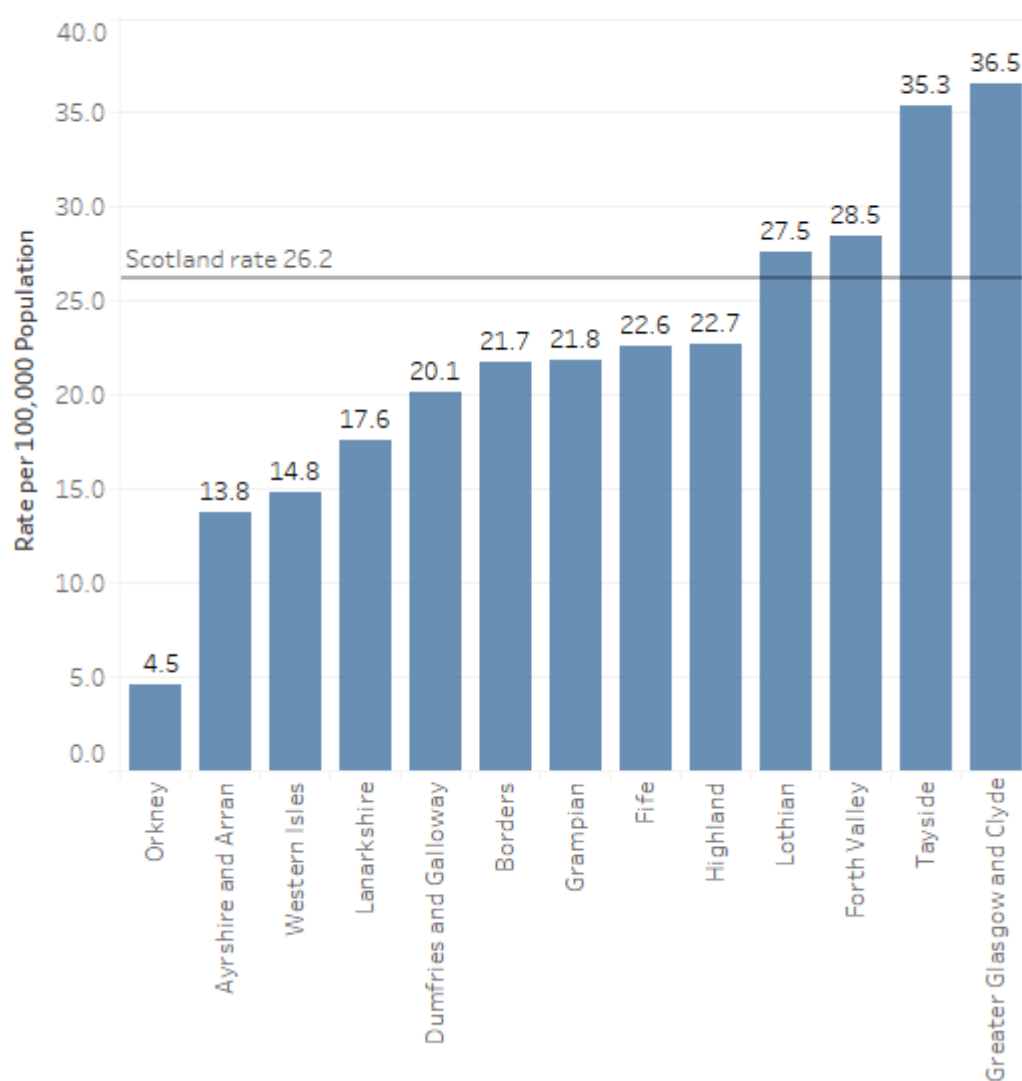
Includes hospital and community CTOs (all interim orders are excluded)

Ayrshire and Arran continue to have a lower CTO rate than Scotland. Lanarkshire is showing slight upward trend.

All other boards have not varied significantly from the national rate during the period.

CTO 2017/18 rates

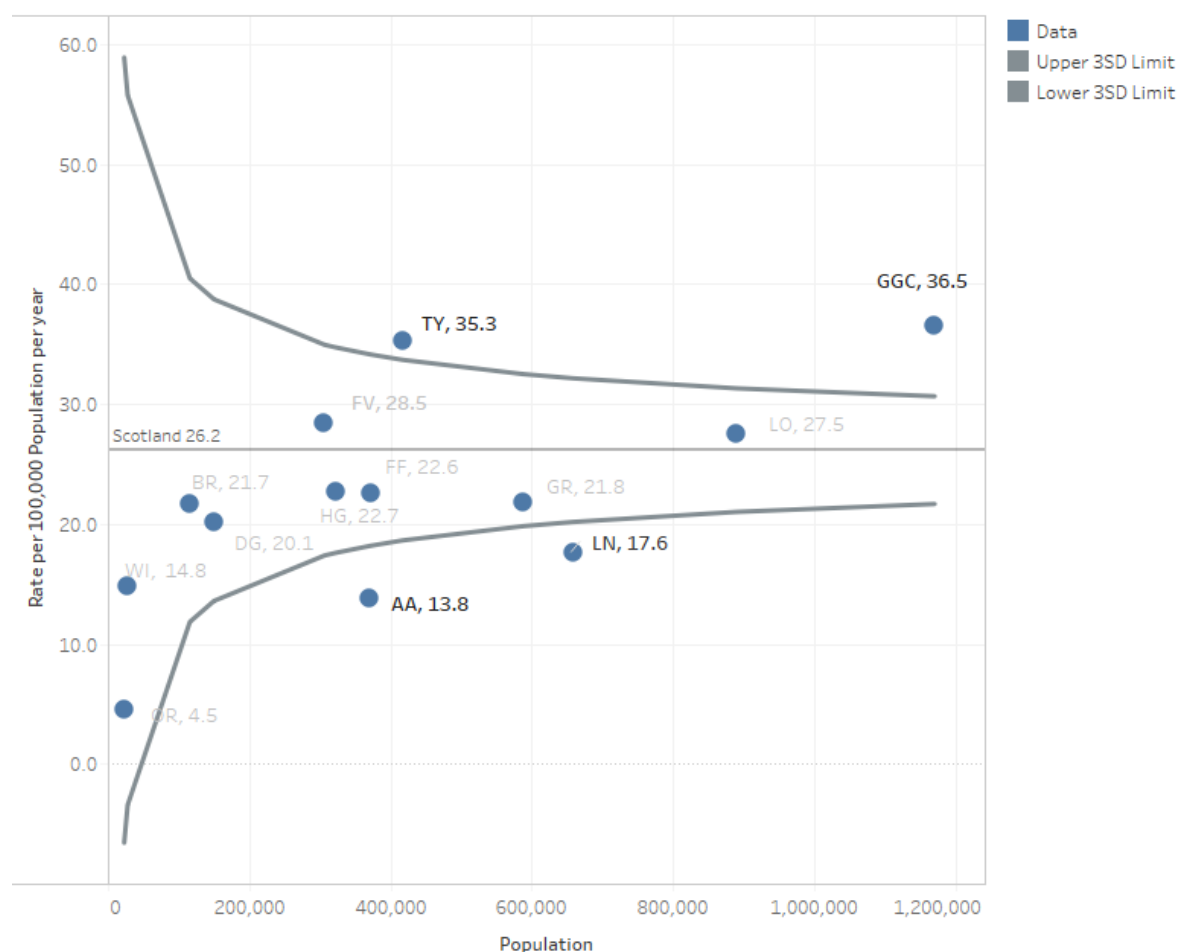
Compulsory Treatment Orders - 2017/18 Health Boards - Rate per 100,000 population



Includes hospital and community CTOs (excludes interim orders)

CTOs 2017/18 funnel plot

Funnel plot showing rates of Compulsory Treatment Orders at NHS board level 2017/18



Includes hospital and community CTOs (all interim orders are excluded)

In 2017/18 two local health boards were above the Scotland CTO rate (26.2; 95% CI 24.9 to 27.6): Greater Glasgow and Clyde (36.5; 95% CI 33.1 to 40.2) and Tayside (35.3, 95% CI 29.8 to 41.5).

In 2017/18 health boards below the Scotland rate are Lanarkshire (17.6; 95% CI 14.6 to 21.1) and Ayrshire and Arran (13.8; 95% CI 10.3 to 18.1).

Variations between local authorities

- Glasgow City, Dundee City, Perth and Kinross, and City of Edinburgh have the highest rates of short-term detention this year.
- West Dunbartonshire, Perth and Kinross, and Inverclyde City have the highest rates for CTOs this year.

Table 2.1 STDCs and CTOs by local authority 2016-17 – number and rate per 100,000 population

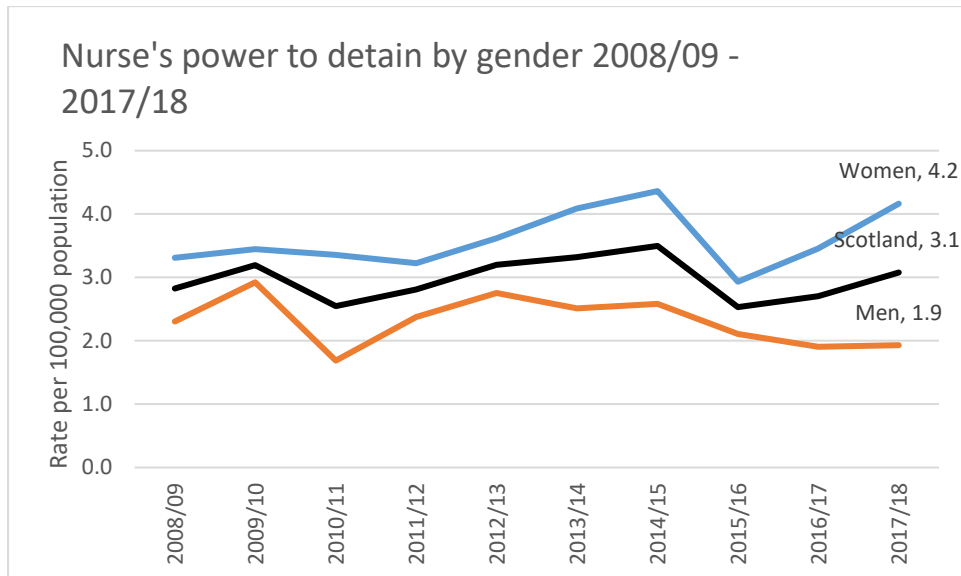
Local Authority	STDCs		CTOs	
	No.	Rate per 100K	*No.	Rate per 100K
Aberdeen City	209	91.3	72	31.5
Aberdeenshire	137	52.3	32	12.2
Angus	47	40.4	30	25.8
Argyll and Bute	82	94.5	24	27.6
City of Edinburgh	521	101.5	155	30.2
Clackmannanshire	44	85.5	17	33.0
Dumfries and Galloway	98	65.7	30	20.1
Dundee City	181	121.7	47	31.6
East Ayrshire	64	52.5	21	17.2
East Dunbartonshire	56	51.8	21	19.4
East Lothian	51	48.6	18	17.2
East Renfrewshire	54	57.0	18	19.0
Falkirk	154	96.2	48	30.0
Fife	267	71.9	89	24.0
Glasgow City	903	145.4	213	34.3
Highland	147	62.5	61	25.9
Inverclyde	74	94.0	30	38.1
Midlothian	40	44.4	20	22.2
Moray	62	64.7	18	18.8
Na h-Eilean Siar	11	40.8	6	22.3

North Ayrshire	61	44.9
North Lanarkshire	206	60.6
Orkney Islands	3	13.6
Perth and Kinross	174	115.2
Renfrewshire	145	82.0
Scottish Borders	62	53.9
Shetland Islands	10	43.3
South Ayrshire	45	39.9
South Lanarkshire	227	71.3
Stirling	71	75.5
West Dunbartonshire	74	82.6
West Lothian	140	77.2
Scotland	4420	81.5

18	13.3
67	19.7
6	27.3
61	40.4
60	33.9
28	24.3
4	17.3
17	15.1
86	27.0
25	26.6
38	42.4
41	22.6
1421	26.2

2. Nurse's power to detain

The Mental Health (Scotland) Act 2015 amends Section 299 of the 2003 Act. This means that a patient can be detained by the nurse for a period of up to three hours. The nurse exercising the power to detain must take all reasonable steps to inform an MHO of the detention.



Over the last ten years the number of nurse's holding powers across Scotland has varied between 134 and 187 (2014/15) per year.

The rate has risen in the past year to 3.1 per 100,000 population (167). The current rate for women at 4.2 is more than twice the rate for men at 1.9.

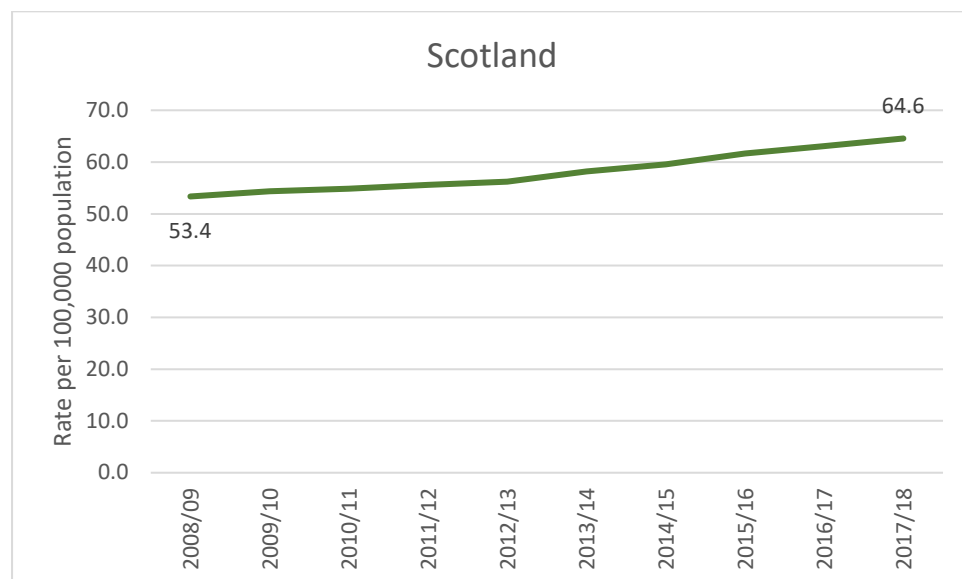
Overall the rate is higher for women than for men and there currently appears to be an upward trend for women and a downward trend for men (2017/18 women 4.2, 116; men 1.9, 51).

3. Total number of Mental Health Act orders in existence

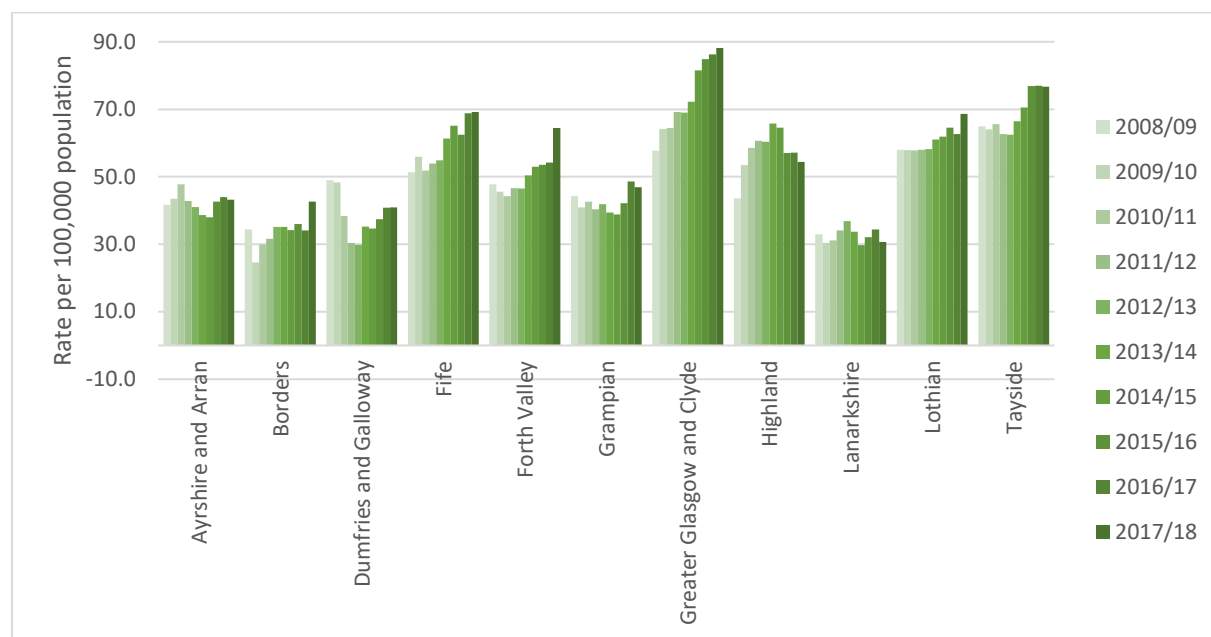
All orders

Over the past ten years the total numbers of orders in existence in Scotland has risen steadily, increasing by 26.2% from 2,776 (January 2009) to 3,502 (January 2018). The national prevalence rate of all compulsory orders has risen by 21.0% from 53.4 to 64.6 per 100,000.

Total number of Mental Health Act orders in existence (rate per 100,000 population)



Ten year trends in prevalence for all compulsory orders by NHS board (rate per 100,000 population)



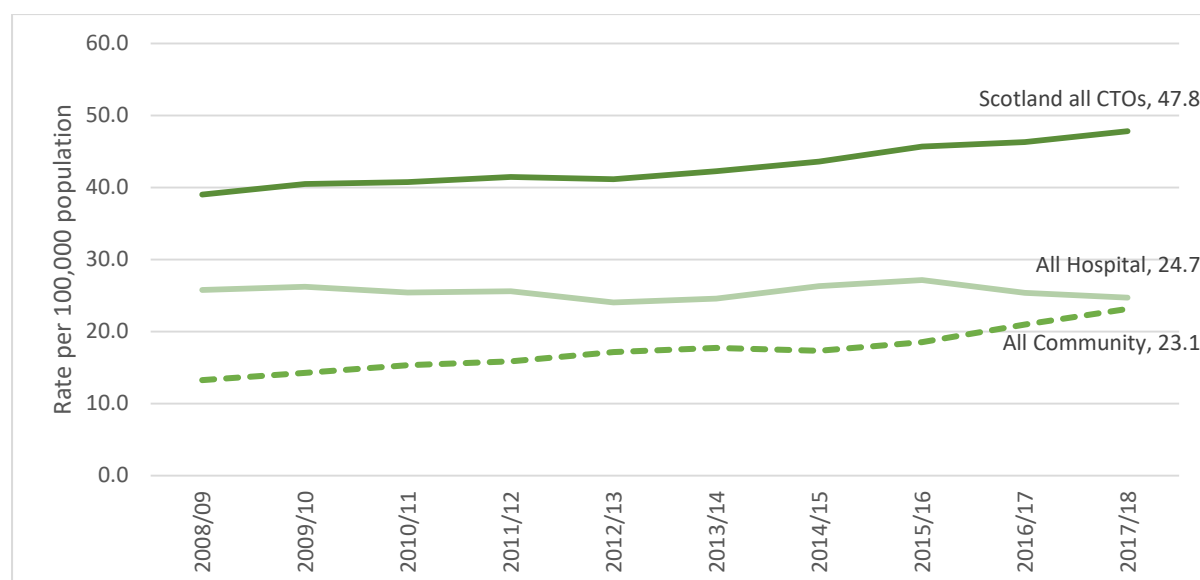
The total number of people who are subject to compulsory treatment in each board area on one date during the year is shown above (by rate per 100,000 people).

We found that:

- Greater Glasgow and Clyde continues to have the highest prevalence of compulsory treatment (88.2 per 100,000). Tayside (76.7), Fife (69.2), and Lothian (68.6) are also high.
- Forth Valley has seen a sharp increase this year from 54.2 to 64.5.
- Lanarkshire (30.7), Ayrshire and Arran (43.2), Borders (42.6), and Dumfries and Galloway (40.9) have a low prevalence of compulsory treatment.

Compulsory treatment orders

Point prevalence of CTOs 2008/09 to 2017/18 (rate per 100,000 population)*



All data refreshed back to January 2009; interim orders included

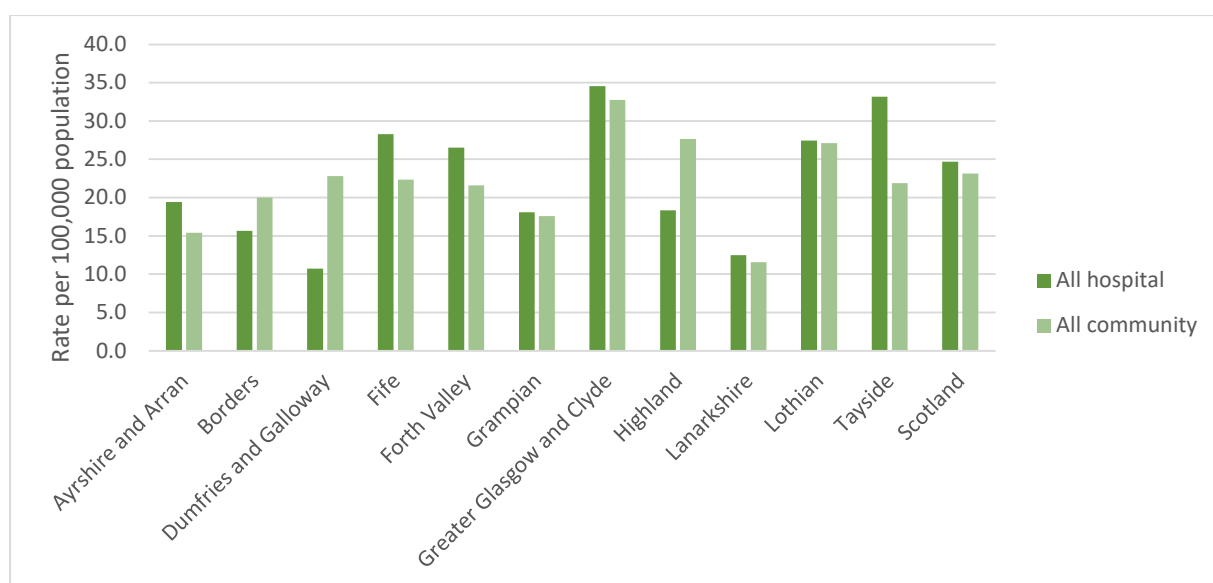
Over the ten-year period the prevalence of all CTOs has increased by 22.6% from 39.0 (per 100,000) at January 2009 to 47.8 (per 100,000) at January 2018. This continues the upward trend.

The proportion of community orders has continued to rise over the period and at January 2018 accounted for 48% of all CTOs. This shows the extent to which the balance of care has shifted to the community for people subject to compulsion.

- The use of hospital-based CTOs is highest in Greater Glasgow and Clyde (34.6), followed by Tayside (33.2), Fife (28.3), Lothian (27.4). Dumfries and Galloway (10.7) and Lanarkshire (12.5) have the lowest prevalence of hospital CTOs compared with other mainland NHS boards.

- Greater Glasgow and Clyde (32.8), Highland (27.6), and Lothian (27.1) have the highest use of community compulsory treatment in Scotland.
- Dumfries and Galloway, Borders, and Highland are currently the only mainland boards which make more use of community CTOs than hospital CTOs.

All existing hospital vs community CTOs per 100,000 population by mainland NHS board January 2018



Advance statements

We have received 301 forms for 287 people.

Individual has an advance statement	285
Individual had both an advance statement and a withdrawn advance statement	14
Individual withdrew advance statement	2
Total	301

Health board	Number
Ayrshire and Arran	5
Borders	4
Dumfries and Galloway	9
Fife	9
Forth Valley	5
Grampian	26
Greater Glasgow and Clyde	80
Highland	5
Lanarkshire	26
Lothian	36
Shetland	1
State hospital	26
Tayside	21
Private hospitals	48
Total	301

4. Place of safety orders

	2007/ 08	2008/ 09	2009/ 10	2010/ 11	2011/ 12	2012/ 13	2013/ 14	2014/ 15	2015/ 16	2016/ 17	2017/ 18
Scotland	228	224	218	300	596	563	662	699	830	1133	1167

Was Place of Safety a Police Station?*	2011/12		2012/13		2013/14		2014/15		2015/16		2016/17		2017/18	
	No	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
No	455	76%	454	81%	588	89%	638	91%	809	97%	1039	92%	1076	92%
Not recorded	33	6%	9	2%	14	2%	15	2%	8	1%	36	3%	31	3%
Yes	108	18%	100	18%	60	9%	46	7%	13	2%	58	5%	60	5%
Total	596	100%	563	100%	662	100%	699	100%	830	100%	1133	100%	1167	100%

- Data from 2016/17 report not refreshed this year; 2017/18 count run at 29/05/18

The number of notifications received (1,167) has risen by 3% from last year (1,133) – this is a 96% rise since 2011/12. We think this reflects continued better reporting by the police.

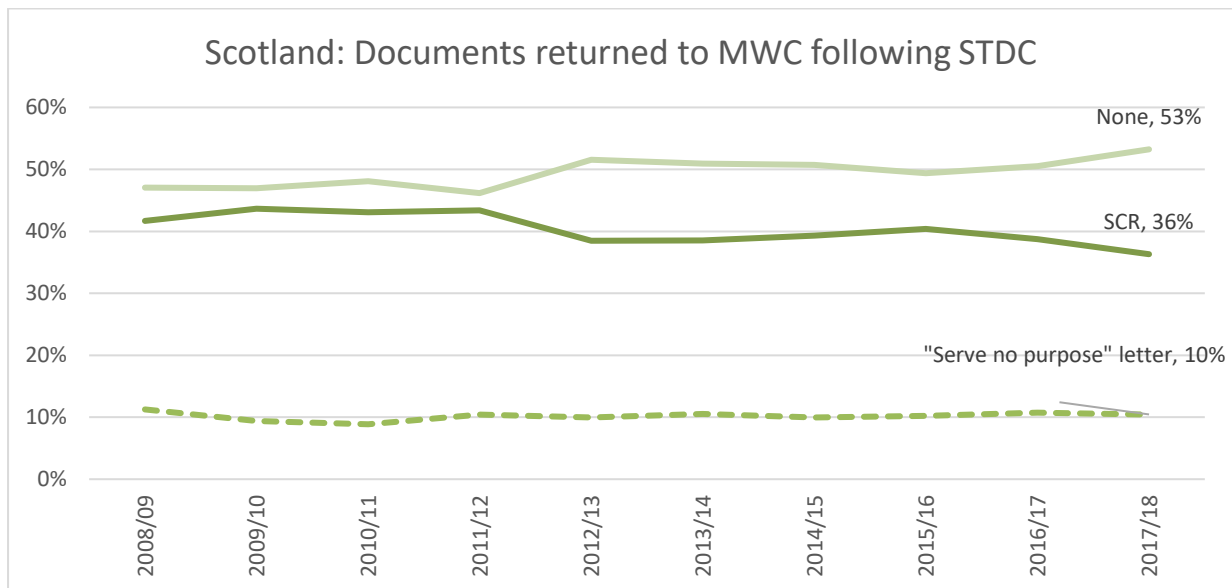
The proportion of incidents where the place of safety was a police station remains this year at 5% (60), still below the earlier high in 2011/12 (18%, 108).

We published a second, more detailed monitoring report regarding place of safety orders in 2018¹.

Mental Welfare Commission for Scotland (2018) *Place of Safety Monitoring report 2018*.
<https://www.mwscot.org.uk/media/431345/Place%20of%20safety%20report%202018.pdf>

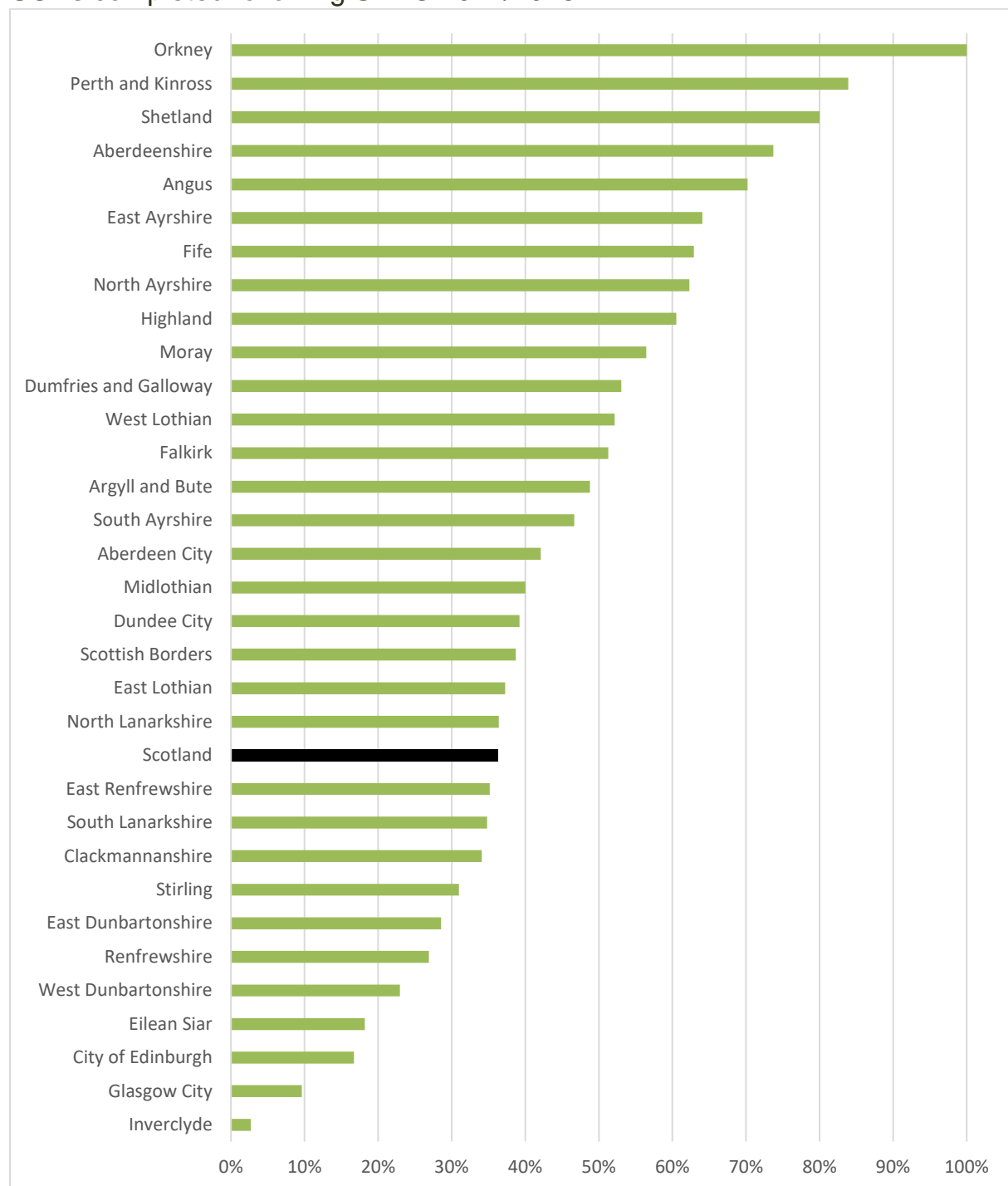
5. Social circumstance reports (SCRs)

Percentage of SCRs completed across Scotland for STDCs - 2017/18



Across Scotland, the percentage of STDCs that trigger an SCR is decreasing. In 2017/18 just over a third 36% of STDCs have an SCR, down from 38% the previous year.

SCRs completed following STDC 2017/2018



There is a significant variation in the completion of SCRs across Scotland.

Addendum 23/10/2019: Social Circumstances Reports
2017/18 Annual Monitoring report
(the original data published was for 2016/17 in error).

	Documents returned to MWC following STDC						STDCs in LA	
Local Authority*	None		“Serve no purpose” letter		SCR		Total	
	No.	%	No.	%	No.	%	No.	%
Aberdeen City	105	50%	16	8%	88	42%	209	100%
Aberdeenshire	29	21%	7	5%	101	74%	137	100%
Angus	13	28%	1	2%	33	70%	47	100%
Argyll and Bute	38	46%	4	5%	40	49%	82	100%
City of Edinburgh	396	76%	38	7%	87	17%	521	100%
Clackmannanshire	23	52%	6	14%	15	34%	44	100%
Dumfries and Galloway	39	40%	7	7%	52	53%	98	100%
Dundee City	83	46%	27	15%	71	39%	181	100%
East Ayrshire	18	28%	5	8%	41	64%	64	100%
East Dunbartonshire	39	70%	1	2%	16	29%	56	100%
East Lothian	28	55%	4	8%	19	37%	51	100%
East Renfrewshire	31	57%	4	7%	19	35%	54	100%
Eilean Siar	9	82%		0%	2	18%	11	100%
Falkirk	68	44%	7	5%	79	51%	154	100%
Fife	81	30%	18	7%	168	63%	267	100%
Glasgow City	705	78%	111	12%	87	10%	903	100%
Highland	32	22%	26	18%	89	61%	147	100%
Inverclyde	67	91%	5	7%	2	3%	74	100%
Midlothian	20	50%	4	10%	16	40%	40	100%
Moray	23	37%	4	6%	35	56%	62	100%
North Ayrshire	9	15%	14	23%	38	62%	61	100%
North Lanarkshire	111	54%	20	10%	75	36%	206	100%
Orkney		0%		0%	3	100%	3	100%
Perth and Kinross	14	8%	14	8%	146	84%	174	100%
Renfrewshire	86	59%	20	14%	39	27%	145	100%
Scottish Borders	34	55%	4	6%	24	39%	62	100%
Shetland (LA)		0%	2	20%	8	80%	10	100%
South Ayrshire	14	31%	10	22%	21	47%	45	100%
South Lanarkshire	94	41%	54	24%	79	35%	227	100%
Stirling	42	59%	7	10%	22	31%	71	100%
West Dunbartonshire	48	65%	9	12%	17	23%	74	100%
West Lothian	54	39%	13	9%	73	52%	140	100%
Scotland	2353	53%	462	10%	1605	36%	4420	100%





Thistle House
91 Haymarket Terrace
Edinburgh
EH12 5HE
Tel: 0131 313 8777
Fax: 0131 313 8778
Service user and carer
freephone: 0800 389 6809
enquiries@mwscot.org.uk
www.mwscot.org.uk